THE EFFECTS OF THE FAMILY STRUCTURE ON ADOLESCENTS' WELL-BEING: A CASE STUDY OF SOME SELECTED SENIOR HIGH SCHOOLS IN THE CAPE COAST MUNICIPAL DISTRICT.

By

MAUREEN POMAAH BEDIAKO (B.A.)

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DECLARATION

I hereby declare that this submission is my own work towards the M.A. Degree in Sociology and that, to the best of my knowledge, it contains no material previously published by another person nor material which has been accepted for the award of any other degree of the University, except where due acknowledgement has been made in the text.

Maureen Pomaah Bediako (PG4628410) Student Name & ID

SIL

31-05-13

(Signature)

(Date)

Certificated by:

George Oheneba Mainoo (Phd) Supervisor (Name)

(Signature)

31/05/3 (Date)

Yaw Amponsah Agyei Supervisor (Name)

(Signature)

31 - 05 - 13. (Date)

Certificated by:

Harriet Takyi
(Head of Department)

(Signature)

 $\frac{31-0S-13}{\text{(Date)}}$

DEDICATION

I dedicate this thesis to God Almighty, my parents, Dr. Grace Bediako and the Owusu-Nimako Family.

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ABSTRACT

This study examines the effects of the family structure on adolescents well-being mediated by family size, parenting quality and religiosity in some selected Senior High Schools in the Cape Coast Municipal District in the Central Region of Ghana. A cross-sectional survey design was used to determine whether these mediating factors significantly influence adolescents' physical, emotional, social and academic attainment well-being outcomes. Utilizing stratified and systematic sampling procedures, a total population of three hundred and ninety five (N=395) adolescents were considered for the study.

From a stepwise estimated regression models, it was realized that family structure alone did not significantly predicts adolescents' social, physical, emotional and academic attainment outcomes. Family mediating variables including parenting quality and religiosity were significant in explaining adolescents' well-being. Controlling for adolescents' own characteristics, it appeared that gender had a significant effects on adolescents' physical, social, emotional and academic attainment outcomes. Parenting quality has a significant relationship with adolescents' academic attainment outcomes. Family size did not have a significant association with adolescents' well-being.

From the findings of this study, it was recommended that strengthening family relationships and parenting practices may improve and protect the well-being of the adolescents.

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CHAPTER ONE

1.0 INTRODUCTION

The true measure of a nation's standing is how well it attends to its children-their health and safety, their material security, their education and socialization, and their sense of being loved, valued, and included in the families and societies into which they are born (Innocenti Report Card 7, 2007).

1.1.0: The History of Marriage and family

Marriage is a social invention. It was created and it survives because it performs functions that society considers important. However, unlike phenomena in the biological or physical sciences that obey identifiable laws of nature, the institution of marriage is shaped by crosscurrents of human behaviour so that neither is the permanence of marriage guaranteed nor is its future course easily predicted (Espenshape, 1985). The history of marriage is as long and varied as the history of human beings. It can be said to be a reflection of human civilization, in Victorian times it was often believed that the four basic types of marriage (group marriage, polyandry, polygamy and monogamy) were representative of different stages of human evolution.

Marriage is a legal relationship between spouse, that is, a legally recognized relationship established by a civil or religious ceremony between two individuals who intend to live together as sexual and domestic partners. It is virtually a universal human institution. In all the wildly rich and various cultures that flung throughout the ecosphere, in society after society, whether tribal or complex, and however bizarre, human beings have created

systems of publicly approved sexual union between men and women that entail welldefined responsibilities of mothers and fathers.

Marriage is the recognized institution for the establishment and maintenance of family life all over the world. Kinship is sustained by marriage. Marriage is therefore the institution through which kinship ties are both established and extended. It is the basic institution of every society. Marital type or forms have been as varied and evolving as there have been different human cultures.

In comparing marriages in different societies and different historical periods, it is discovered that marital partners everywhere have very definite duties toward each other thus mutual obligation and procreation.

New trends of marriage have surfaced over the past few years and are spreading across the nations due to globalization and external exposure. In some societies, people marry a person of the same sex or more than one partner of the other sex and the marriage may be quite unrelated to happiness, love, sexual intercourse, or procreation (Espenshape, 1985). It may not lead to establishing a new household, and it may, from the very beginning, be planned only as a temporary arrangement, but not cohabitation arrangement.

1.1.1 Research Outcome

Marriage and family are natural and inevitable institutions which provide for procreation and the proper raising of children and human continuity over time. The emerging trends in marriage and family arising out of divorce, separation, remarriage, migration, same sex relationships have brought about a dramatic growth in the proportion of children living in

various family forms which tend to play a critical and influential role on their well-being (Simon & Alstein, 2003; Kirby 2002, Sun & Li, 2002).

Research has consistently shown that family structure can facilitate or limit the ways in which parents are able to positively influence the future outcomes of their children (Amato & Keith, 1991; Hines, 1997; Amato, 2001; Sigle-Rushton & McLanahan 2002). A substantial body of research (Chelin, 2009) again confirms that, the structure of the family into which a child is born and develops, present both advantages and disadvantages that subsequently affect cognitive, socio-emotional and even physical health outcomes. McLanahan and Sandefur (1994) showed that children born to two married biological parents – the traditional family structure – had lower risk of being a high school dropout, pregnant teen, and idle; these children also had better adult outcomes. Later studies observing younger children found that those born to married parents had fewer socio-emotional and health problems as well as higher cognitive scores (Brown, 2004; Carlson & Corcoran, 2001; Bzostek & Beck, 2008; Harknett, 2005).

1.1.2 Justification of Adolescent for the study

The justification for studying adolescents' outcomes is premised on Piaget's theory on adolescents. According to Piaget (1896-1980), the adolescent years are remarkable because youth move beyond the limitations of concrete mental operations (6years-11years) and develop the ability to think in a more abstract manner (12years).

The ability to use abstract thought and keen observational skills enables them to become more attuned to others and more sensitive to people's needs; it can also lead to some

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social and emotional difficulties when youth use their cognitive abilities to compare themselves to others. Adolescents feel exceptionally unique and different from other people as they perceive unique abilities of being smatter, stronger and better than others, or conversely, unique problems feeling as though they are dumber, weaker, and inferior to others (Piaget, 1942).

This kind of "personal fable" leads to feelings of sadness, frustration, and loneliness. If these negative thoughts and feelings continue to strengthen, youth become depressed or hopeless; which leads to acquiring other dangerous behaviors like drug use, unsafe sexual activity, or even suicide. Piaget's found that youth entered the stage of formal operations at approximately 11 years of age on average. This stage (12-18) in a person's life is worthy of study because of the emotional social, physical and academic attainment implications they are likely to encounter. Besides, many studies on family structure had centered on children living a huge gap in family structure literature.

Adolescents' Social well-being

Social well-being is one's sense of involvement with other people and with the larger community. How people engage in interaction with other people as well as how they experience their connections with others. The strength of those relationships determines their social well-being outcomes. According to Lerner & Steinberg (2004), these behaviors may be both overcontrolled and undercontrolled and may include antisocial acts (Paterson & Zill, 1986) hostility, social irritability, social rejection, passivity, social misunderstanding, and social withdrawal or positive adaptability such as friendliness,

cooperativeness. Family structure and its process tend to influence the favorable or unfavorable outcomes in adolescents well-being (Op Cit, Oheneba Mainoo, 2008).

1.1.2 Adolescents' Physical well-being

The activities one engages in and the daily choices one makes affect the way they feel physically: getting enough rest, practicing good eating habit, exercising to relieve stress and locomotion among others. The kind of one's family environment determines how adequately they enjoy physical health. Family resources such as income and time inputs are consequential to the adolescents' physical health outcomes (Cox & Williams, 2000).

1.1.3 Adolescents' Emotional well-being

Families present a wide range of emotional outcomes to adolescents. Emotional well-being is those feelings of the adolescents resulting from their experiences. Negative feeling may be in the form of anger, frustration, anxiety, sadness, depression, worry, low self-esteem. Positive feelings may include a feeling of happiness, high self-esteem, satisfaction and self confidence. Comparing adolescents from single-parent and the two-parent families, Chelin (1999), found that adolescents in single-parent homes tend to exhibit depression, anxiety and low self-esteem than their counterparts in the two-parent homes. Adolescents from intact homes where there is continuous parental conflict also experience various emotional effects that cause increasing anxiety, anger, loneliness and depression (Oheneba Mainoo & Ow, 2008).

1.1.7 Adolescents' Academic Attainment well-being

Research shows that children reared in single-parent families do not fare as well as those reared in two-parent families, on average, regardless of race, education, or parental remarriage (McLanahan & Sandefur, 1994); they are more likely to experience increased academic difficulties and higher levels of emotional, psychological, and behavioral problems (Amato, 1994; Dawson, 1991; McLanahan, 1997). Middle income single mothers who live in residential areas and enroll their adolescents in private schools that carter for excellent academic and moral nurturance tend to reverse their experience of educational under -performance and negative psychological outcomes (Oheneba Mainoo & Ow, 2008). The issue of low educational output for adolescents is the joint product of family structural effects, residential and cultures. The dominant sub-cultures of residence of adolescents and the community impact including that of the school determine in part the intellectualization of adolescents who experience parental divorce.

Coleman (1992) also argued that, the structure of the family influences the likelihood that adolescents will have access to the economic, cultural, and social capital that maximize his or her odds of educational success.

1.1.8 Parenting quality

According to Carlson 2006, youths who experience higher levels of parental involvement and a closer relationship with their parents are less likely to exhibit behavioral problems

and to engage in risky behaviors. In addition, they tend to achieve better grades and higher levels of education and to experience better emotional health. The quality of parenting is a function of parenting style; democratic parents other than authoritarian parents experience different level of parenting quality.

1.1.9 Religiosity

According to the latest polls released by the Win-Gallup International Religiosity and Atheism Index (2012), which measures global self-perceptions on belief, Ghana was rated the most religious country in the world with 96%. The Ghanaian society is characterized by different religious entities and religion is seen as an important mechanism through which families mediate adolescents' role identities, relationships and behaviors. Research findings indicate that aspects of religious beliefs, affiliation and practice also play a role in supporting psychological, emotional, social and academic attainment outcomes ((Ellison, 1995).

1.1.10 Family size

Family size refers to the number of people within one's family. Family resources are very crucial to its survival in that, the resources available to the family begin to dilute as the family grows (Hanson, 1994). According to Wilcox (2001), larger families have fewer resources for education and home improvement than smaller families do. In Ghana, people of low socio-economic status and rural dwellers have larger family sizes with attendance difficulties for adolescents' educational attainments.

1.1.11 Family Structure

Family transitions and the different family forms experienced by the most developed nations especially the United State is not so different from that of Africa. In Africa, the traditional African society has come under the influence of exogenous forces which have not only transformed the society's orientation but in some instances they have distorted the social system. As part of the process of rapid demographic and socio-economic change due mainly to urbanization and modernization, patterns of family formation and family life are continuing to undergo considerable change, altering the composition and structure of families in our societies. The traditional family structure under pressure from rapid social change is undergoing erosion, and is generally splitting up to such an extent that it is failing to fulfill its primary role of socialization. (Degbey, 2000). Work done in less developed contexts like Africa indicate that, children may live in several family arrangements other than the traditional family setup due to parental death, separation, divorce, migration (both external and internal), and polygamy (Desai and Lloyd, 1994). A comparative study done by Lippman, Wilcox and Whitney (2009) in six less developing nations, suggested that, children in South America and Sub-Saharan Africa are least likely to live with one or both biological parents. Thus, in Kenya 50.6% of children were living with both biological parents, 30.3% were with one biological or single parent and 19.2% living with no biological parent. Again, in Nigeria 60.2% of the children were found to be living with their two biological parents, 20.6% living with single-parents and 19.2% living with none of their biological parents. From the same study, those who were found to be living with their parents in Kenya were more likely to be enrolled in school compared with children living with one or no biological parent.

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In Ghana for example, the per head levels of consumption have been found to be substantially lowered in households headed by divorced and widowed women than in those headed by women who were married but with an absent spouse (Lloyd and Gage-Brandon 1992). Two resident parents therefore are likely to be a benefit to children.

1.2 Problem Statement

Long overlooked is the systematic investigation of family processes and adolescents' well-being in non-white families. Studies in the past decade have made strides towards describing the effects of the family structure on child well-being, particularly in American, Canadian and Australian families. High-quality studies are needed in Africa especially in Ghana where single-parent families and step-parent families are becoming common.

The changing phase of marriage in Ghana as a result of divorce, migration and remarriage has affected the evolution of family patterns and as a result, scarcity in households' income and other non-economic resources such as time. This has brought about changes in the holistic development of adolescents' physical, social, academic attainment and emotional well-being in Ghana.

It has therefore become necessary to examine the effects of family structure on adolescents' well-being, particularly since the effects of family structure may vary as a function of parenting quality, religiosity and family size. This study will allow us to bridge gap in family literature in Ghana.

Again, studies done in these developed countries show a consistent patterns of outcomes in literature. The observed patterns of family structure and adolescents' well-being

realized in developed contexts may not be the case in the Ghanaian setting so it becomes difficult to draw a general conclusion that children and adolescents in developed countries are the same as children and adults in less developed countries with regards to the phenomenon under study.

A study conducted by Wilcox and Lippman (2009), in Kenyan contradicts some foreign findings. This is a clear indication that we cannot depend on such finding to make policy recommendations in Ghana. There is the need to provide a more contextual balance in the study of the many ways and mechanism through which family structure can affect adolescents' outcomes by crafting new set of research instruments with appropriate methodologies that will be relevant in our settings in order to contextualize nature of such studies in Ghana.

Although several non-Ghana studies have identified one or more mediating factors of family structure and adolescents' well-being outcomes, no study to date has examined the effects of family structure on adolescents' outcomes mediated by parenting quality, religiosity, family size and gender in Ghana. This research was designed to address this problem.

In sum, the predictor variables of family structure and adolescents outcomes are:

- -Parenting quality
- -Religiosity
- -Family size

This study therefore has the potential to help researchers to better understand what role family structure and the variables associated with it play in influencing adolescents outcomes.

1.3. 0 GENERAL OBJECTIVE OF THE STUDY

To examine the effects of family structure on the physical, social, emotional and academic attainment well-being of the adolescents.

1.3.1 SPECIFIC OBJECTIVES

- To examine the effects of both single parent families and the two-parent families on the adolescents' overall well-being.
- To examine the effects of religiosity on adolescents' well-being.
- To examine the effects of parenting quality on academic attainment well-being outcomes.
- To examine the effects that family size has on adolescents' well-being.
- To find out if gender disparity of males and females has any influence well-being outcomes.

1.4 RESEARCH QUESTIONS

- Are adolescents in single -parent families and two-parent families significantly different on well-being outcomes?
- Is there a significant relationship between religiosity and adolescents outcomes?
- ➤ Is there a significant association between parenting quality and adolescents academic attainment outcomes?

- ➤ Is there a significant difference between family size and adolescents' well-being?
- Are adolescent males different from adolescent females on well-being outcomes?

1.5 RESEARCH HYPOTHESES

- Adolescents in single -parent families and two-parent families are significantly different on well-being outcomes.
- There is a significant relationship between religiosity and adolescents' well-being.
- There is a significant association between parenting quality and adolescents' academic attainment outcomes.
- > There is a significant different between family size and adolescents' well-being.
- Adolescent males are different from adolescent females on well-being outcomes.

1.6 SIGNIFICANCE OF THE STUDY

The study employed multiple independent variables to determine their effects on adolescents' well-being within the family context. It has the potential of adding to existing literature and also serving as a source of reference material for future studies especially in Ghana where work done in this area is very minimal.

Since the family has always been considered as a major stakeholder in policy formulation and implementation regarding children, this study's findings will be useful for government and other organizations that champion the course/plight of children in

various dimensions. Government and NGOs can improve family policies to increase program effectiveness in Ghana.

The study will bring to light the educational implications of adolescents who come from different family structure. This will help school counselors and teachers, counselors from youth programs, religious settings and others, to plan effective intervention goals to run programs not only for the youth but also for parents, guardians and other caregivers by utilizing findings of this study.

This will provide much needed information that has the potential to inform policy and enhance program services to families so that a one-size-fits-all approach to service delivery can be avoided. The outcome of the effects of religion, parenting quality, family size and adolescents' may enable government to support religious organizations and other bodies whose programs and activities tend to have significant impact on adolescents

The study will continue to spur interest in family research in Ghana in diverse ways and it will be of much importance to the researcher as she gains much knowledge and understanding in family related studies.

1.7 THE SCOPE OF THE STUDY

Scholars have researched into family structure and physical, social, emotional and academic attainment well-being of the adolescent using different variables on different respondents with appropriate research designs (McLanahann & Sanderfur, 1996). For the purpose of this study, family structure shall be restricted or limited to the intact and

single-parent families. Potential mediators of the family that this study looked at are; family size, parenting quality, religiosity and gender. The well-being of the child shall be considered from their physical, social, emotional and academic attainment levels. Information shall be gathered from adolescent's reports only. Population included in the studyare adolescents aged between 12-18 years. Adolescent are chosen for the study because of their ability to retrieve information and submit logical responses to items on the questionnaire. This is a very important stage of life course that involves unique developmental task-identity formation (Piaget, 1964; 1964, Erikson; 1963).

1.8 CHAPTER ORGANIZATION

The entire study is organized into five main chapters. The chapter one of the study is the introductory section which consists of the background, problem statement, objectives, research questions and hypothesis, significance of the study, the scope and the chapter organization. Chapter two takes into account literature review of the study and this is made up of both theoretical and empirical premises upon which family structure and children well-being have been studied by other scholars. Chapter three considers the methodology of the study. It considers brief background of the area of study, the population, sample and sampling technique, instrumentation and measurement issues, data collection and management, selection of statistical model and analysis. The forth chapter of the study is devoted to analysis and discussion of the study results. Finally, chapter five present the summary, conclusions and recommendations of the overall study.

1.9 Operational definition

Family structure

Living arrangements or family set ups that children are likely to find themselves. In families are patterns of positions and roles which are clearly defined. The study considers two family forms that is, the intact living arrangements and the single-parent living arrangement.

The single-parent family refers to a family unit that comprises only one biological parent with offspring of the divorced family. Single parenthood may also be caused by parental death, or desertion of a spouse. The custodian parent performs the functions usually shared by the two.

Intact family refers to a family unit that consists of both biological parents and their children. In this type of living arrangement there is functional division of labor especially among the parents. Members of this family are interrelated, interdependent and interconnected.

Adolescent: The research considers young adolescents less than 18 years specifically those within 12-18. This category is crucial to their growth and developmental processes (Erikson, 1963; Neigbor et al, 1993; Dosier et al, 1993). Again, children within 12-18 years can give responses to issues that concern their physical, emotional, social and academic attainment well-being when asked in the study. (NB: In this study the term "Adolescents and "Children/Child" are used interchangeably).

Wellbeing: is the state of being happy and also being actively engaged with life and with other people. In this study it includes physical, social, emotional, and academic attainment outcomes of the adolescents.

Physical well-being: encompasses all activities that bring about physical fitness in an individual and this may include healthy eating habit, frequent exercises, locomotion, energy vitality, etc.

Social well-being: is event in a person's life which may facilitate or limit cohesion bonding. Manifestation of this may result in, conformity, acceptance, irritability, hostility, disconnection, etc.

Parenting quality: the time that parents spend with their children, their relationship closeness as well as their involvement in the affairs of their children.

Religiosity: ones commitment and involvement in his or her religious practices.

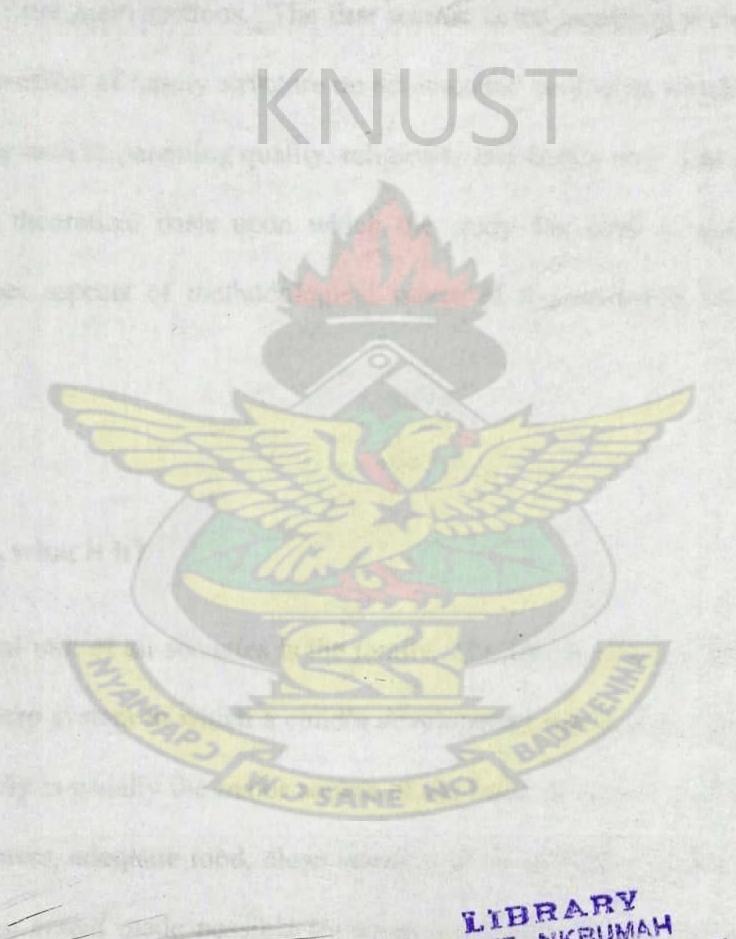
Family size: the number of people living within a particular family setting.

Emotional well-being: experience within a person's settings that makes him manifest feeling of sadness, loneliness, frustration, anger, fear, sadness, happiness, anxiety, depression, quietness, among others.

Academic attainment: attitude put on by the adolescent for good academic outcome reading skills, retrieval, usage of electronic device such as the internet, group discussions, studying etc.

Summary

This chapter of the study serves as the introductory chapter on the effects of the family structure on adolescents' well-being outcomes mediated by parenting quality, religiosity and family size. The chapter discusses the objectives of the study, research question and emanating hypotheses. In addition the significance, scope and operational definition of key terms in the study were discussed.



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CHAPTER TWO

LITERATURE REVIEW

2.0 INTRODUCTION

This chapter reviews literature of the entire study. It provides an overview of what is known about the relationship between family structure and child wellbeing. The chapter is divided into three main sections. The first section is the empirical review comprising literature on the effect of family structure on adolescents' wellbeing which examines key family variables such as parenting quality, religiosity and family size. The second section considered the theoretical basis upon which the study has been conducted. The last section examines aspects of methodological issues of the reviewed literature for the study.

2.1 The family, what is it?

The Fundamental unit of all societies is the family. The family is considered as the main element of a micro system in which a child's development takes shape (Bronfenbrenner, 1979). The family is usually the major source of the basic necessities of life and health, love and tenderness, adequate food, clean water, a place and time for rest, clothing and sanitation, to the extent made possible by socio-economic, cultural and environmental conditions (Smart & Smart, 1976). It has often been regarded as the cornerstone of society.

In pre-modern and modern societies alike, it has been seen as the basic unit of social organizations and one which carries out a vital task, such as socializining children (Haralambos & Holborn 2007).

2.2 The family's role in adolescents' well-being

Almost every person in our society starts life in a family of some kind. The kind of family one has influences the kind of person one grows up to be. In families, children first encounter concepts of right and wrong, as well as role models who shape their sense of what it is possible for them to do and be. They also develop psychological traits and behavioral patterns that may endure forever. They learn social skills necessary for participating in the larger society. They acquire much wisdom and knowledge they will need as adults. Families filter children's experiences with others and provide nurture and care that influence child development. Families determine the quality of a young child's world and shape the foundations for later development. Parents and families play the primary role in children's lives and a nurturing supportive family is the best foundation for good child development. (Grusec and Hastings, 2007)

2.3 Empirical Review

Empirical studies have shown that family instability is associated with low child cognitive scores, increased behavioral problems, and poor health conditions (Cavanagh & Huston, 2006; Fomby & Cherlin, 2007; Osborne & McLanahan, 2007; Magnuson & Berger, 2009). Nevertheless, family structure at birth still has an influence even when

stability is taken into account (Cavanagh & Huston, 2006; Osborne, Manning & Smock, 2007; Raley & Wildsmith, 2004). Carlson & Corcoran (2001) found that children born to single parents had more behavioral problems and lower cognitive scores regardless of whether their family structure was stable or unstable since birth.

2.3.1 Family structure and Child well-being

Single-Parent families

Single-parent families may occur in various ways, including divorce, death of a spouse and a single person deciding to have or adopt a child without getting married. Single parent families have increased considerably over the past two decades. Parenthood is seen as challenging and difficult especially in single-parent families. The challenge and difficulty faced with single-parent families according to Robert Weiss (1979), stems from inadequacy of resource availability and consequent overload in terms of responsibility, task and emotions support (MacLanahan, 1999).

Studies show that adolescents in single-parent families are more likely to be depressed and also likely to have higher rates of anti-social behavior, aggression, anxiety, and school problems than those in intact families. (Gringlas and Weinraub, 1995). A study reported by the National Center for Health Statistics in the USA, noted that the prevalence rate of learning disabilities among children was 5.5 percent in intact families, 7.5 percent in mother-only families, 9.1 percent in mother-stepfather families, and 8.3 percent in other family situations (Zill and Schoeborn, 1990). The same study reported the prevalence of emotional and behavioral problems as 8.8 percent in intact families,

19.1 percent in mother-only families, 23.6 percent in mother-stepfather families, and 22.2 percent in other family situations.

Adolescents in single-parent families according to Amato (1987), report more conflict with sibling, less family cohesion and more family stress. Kennedy 1985, also found that adolescents in single-parent homes not have perceived lower cohesion or a sense of emotional bonding that family members have towards each other than those in intact families but they also has the higher rates of serious family relationship problems.

Further, adolescents in single-parent homes are less likely to achieve higher levels of educational standard. Their occupational choices are limited with low income levels (Muller and Copper, 1986).

Household income issues are thus crucial to the parenting issues of single-mother families. For families with few economic resources and little social support, many problems arise including learning difficulties (Llyod, 1996).

For single mothers whose economic resources allow them to provide for adolescents' needs and to offer stimulating opportunities as well, outcomes may be very different. (Ibid, Gringlas & Weinraub,1995). In affluent single parent families, overwhelm of parenting exist because there is only one parent to talk over problems or help with homework of offsprings in the family. In stressful circumstances, parental resources may be stretched sooner than in cases in which two parents are involved; and, when this happens, children of single parents are likely to have adjustment problems. Although the research findings are still somewhat limited, the most important explanatory factors

appear to be available resources and the quality of family interactions, rather than the nature of the family structure itself (Hanson et al., 1997; ibid, 1994).

The Single-Father Headed Families

In less developed contexts, children may live in single-father households for many reasons: lack resources caused by a family crisis such as widowhood, divorce, migration, separation, better opportunities for education and training and the strengthening of family ties (Desai and Lloyd, 1996). If such children live in extended single father- households, their welfare would be improved because of their access to the parent as well as other related adults committed to their care as well as from access to the resources that these adults can provide.

Single-father-households tend to have higher incomes, fewer time constraints and are more likely to have a resident partner; such that children in these households are assumed to have access to more resources than those in single mother- households. (Bronte-Tinkew, 1999).

In a study conducted by Lamb (2004), adolescents whose fathers were affectionate, sensitive, spent time with their children, and had more positive attitudes had greater social skills, cognitive ability, school performance, self-esteem, and social confidence.

The Single-Mother Headed Families

In most less developed countries, adolescents of female-headed-households are worse off on average in terms of resource dilution and adolescent nutrition than residents of male-

headed households (e.g Levison 1989 for Brazil; Kossoudji and Mueller 1983 for Botswana; Adams 1991 for Zimbabwe; Kazi and Rasa 1989 for Pakistan; Rosenhouse 1989 for Peru as cited in Op.cit, 1992). In some countries however, the differences are not large or statistically significant. In Jamaica and Peru and in one case in Ghana, Lloyd and Gage- Brandon (1993) have found that, on the basis of resource dilution, adolescents in female- headed-households appear better on average than male-headed-households. A number of studies in Sub-Saharan Africa have found that adolescents are more likely to succeed in the educational arena if they are raised in female-headed households, compared with those raised in homes with their two biological parents. (Buchman and Hannum, 2001). In reflecting on the findings regarding female-headed households and children's school enrollment in Sub-Saharan Africa, Cynthia Lloyd and Ann Blanc argue that in many African societies "female household heads are more likely to invest resources, including time, money, and emotional support, in facilitating the education of children living in their households than are male household heads (ibid, 2001). This could give children an educational advantage in female-headed households. This growing body of research suggests that we might expect to find that adolescents in the developing world are more likely to be enrolled in schools if they are living with a single biological parent (usually their mother), compared with adolescents children living with two or neither of their biological parents. Moreover, given regional variations in paternal investments, this pattern may be particularly pronounced in Sub-Saharan Africa.

The Two-Parent Families

In particular, the literature on families in the developed world suggests four important advantages that two biological parents hold over a single or lone-parent families:

- Two-parent families typically have access to more employment, income, savings, and kin-related economic resources than do single parent families.
- On average, two parents are able to devote more time, affection, and monitoring to their children than are single-parents.
- Two parents can monitor one another's parenting, as well as relieve each other when they find that parenting is becoming difficult or wearisome. Consequently, the overall quality of parenting tends to be higher in two-parent families, compared with single-parent families.
- . Two parents are typically more successful in involving both sets of a child's kin based networks in providing social and emotional support to a child, compared with single-parent families.

(Coleman et al, 1996; Amato, 2005). These assumptions postulated by Coleman do not hold true for all countries. There may be some exceptions.

Work done in some less developed country contexts has also emphasized that the two-parent household may result in more favorable academic attainment outcomes. McLanahan and Sandefur (1994) showed that children born to two married biological parents – the traditional family structure – had lower risk of being a high school dropout, pregnant teens, and idle. These children also are less likely to be antisocial, aggressive, depressed and anxious in their adult life. Later studies observing younger children found that those born to married parents had fewer socio-emotional and health problems as well as higher cognitive scores (Brown, 2004; Carlson & Corcoran, 2001; Bzostek & Beck, 2008; Harknett, 2005). Using data drawn from Demographic and Health Surveys in six countries (Colombia, Egypt, India, Kenya, Nigeria, & Peru) and from the Continuous

Household Survey in Uruguay, Wilcox, Lippman and Whitney (2009) found that secondary-school-age children are more likely to participate in schooling if they live with at least one biological parent. Moreover, children in Colombia and Uruguay are also more likely to be enrolled in school if they live with two parents.

The Extended Families (other than the two mentioned)

Among extended family households, there is the belief that kin residing together in very close proximity to each other have the ability to meet many of the social and economic needs of family members including children. In modified extended households, two parent households and communal households where other family members reside; there may be those who provide housekeeping and child care services (Op.cit 1992).

According to Coleman (1996), children may be most likely to succeed educationally when they have easy access to many family members who can invest in them, such as an extended family member, and may be most likely to fail when they have access to only one or no parent, as is the case when children live in a single-parent family or in an orphanage. Coleman reckons that, children living with both of their biological parents in extended families would have the greatest access to the economic, cultural, and social resources of their kin. The extended family according to Coleman (1996) is so strong that kin networks—grandparents, aunts, uncles, and so forth—buffer against the disadvantages associated with single parenthood, orphanhood, poverty, or poor schools near one's biological parents.

Specifically, research indicates that in some developing countries the extended family is so strong that it offers a "safety net" that buffers against any potential ill effects of single

parenthood, orphanhood, and poverty when it comes to adolescent's education. (Eloundu-Enyeque and Shapiro, 2004). A number of studies of Asian countries suggest that children in single-parent families do as well or better than children in two-parent families because extended family members tend to reach out to single mothers and provide them with extra financial and social resources to make up for the loss of a father due to divorce or death (Marquardt, 2005). Likewise, a number of studies in Africa indicate that children who are fostered to kin—either because they are orphans, because their biological parents are too poor, or because their kin have access to better schools than their biological parents—can do as well or better in school as children who are reared by their biological parents.

2.3.2 Mechanisms linking family structure and well-being

Family structure operates through a number of mechanisms such as economic status of parents (income), parenting quality, religiosity and family size for child wellbeing outcomes. Those mechanisms relevant to this study are discussed in the preceding paragraphs.

Parenting Quality and Physical, Social, Emotional, and Academic attainment Outcomes

How well a family functions is tied to the quality of the relationship between parents and their children. This relationship is a critical ingredient in shaping child development and setting developmental pathways into adulthood (Bornstein, Davidson & Moore 2003).

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Research in Canada and the United States have consistently shown that parenting practices influence a range of childhood and adulthood outcomes, such as aggressive behaviour, pro-social behaviour, academic achievement and high school completion (Erlbaum, 2003).

Effective parenting puts sensitive child-rearing practices at the centre of parent-child interactions. These practices include a careful monitoring of a child's behavior, a committed decision to provide a warm and caring environment, and encouraging independence. This combination of monitoring, responsiveness, and encouragement has been defined as an "authoritative style of parenting" (Baumrind, 1967)

Although the style of parenting is important, parents' level of involvement in their children's daily lives is very significant. Research indicates that the amount of time in which parents are interacting directly with their children is positively related to child outcomes (Cox & Williams, 2000). However, the importance of time is not measured by the actual number of hours the parents spend with the child, but rather the "quality" of that time. Parents do not only input time and economic resources into the children but they also supply many other intangible resources that are consequential for child cognitive, behavioral and health development. One such intangible parental resource is parenting quality.

Particularly for young children, but also for older children and adolescents, at least as consequential as the time that parents spend with them is the quality of their parenting during that time is even more important. In early childhood, two key dimensions of parenting quality are sensitivity and responsiveness to the child. Adolescent's outcomes

are better when parents are warm and nurturing, and they tend to be aggressive and antisocial behaviors when parents are either harsh and punitive or detached and neglectful. (Bayer & Cegala, 1992)

Single mothers who engage in gainful employment have less time to give to their children as would two parents in a married-couple family. There can be no division of labor within her household—the single mother bears the entire burden associated with child care, the financial and organizational logistics of the household, and her own welfare. At the same time, children growing up with single mothers get less time with their fathers than they would in homes where the father is present.

Time allocated to raising and caring for children is expected to be positively correlated with their wellbeing (Scott-Jones, 1994; Haveman & Wolfe, 1995). While the quality of time a parent spends with the child is salient, studies have shown that quantity of time also has positive consequences for child cognition and health (Antecol & Bedard, 2007; Ermisch & Francesconi, 2001). Not only do single mothers have less time to spend with their children (since they bear more of the household and parental responsibilities relative to their married counterparts), but absent fathers also tend to spend less time with their children than do resident fathers (McLanahan & Sandefur, 1994; Scott-Jones, 1994; Tach et al., 2010).

Parental monitoring is important for keeping childrens behavior on track and ensuring that children meet their individual responsibilities. Empirical evidence supports the notion that parental monitoring has positive effects on children. For example, McLanahan

(1997) reports that lack of supervision by parents is associated with poor school performance among children in single and stepparent families.

Another core feature of parenting is parental support, which is positively related to desirable outcomes for children and adolescents' physical, social, emotional and academic attainment well-being (Baumrind, 1991). For instance, interacting with children in positive ways has been shown to raise grade point averages and decrease externalizing behaviors (O'Connor, Hetherington, & Clingempeel, 1997). Parent-child relationships that cross household boundaries also influence children's development. Evidence suggests that closeness to nonresident fathers is positively associated with child well-being (Amato & Gilbreth, 1999; White & Gilbreth, 2001).

In single-parent families, parenting may be less effective because often the custodial parent (usually the mother) must be both provider and supervisor. Non-custodial fathers are less involved than custodial fathers, and even if they are involved, they do not play as strong a role in the discipline and shaping of their children's lives (Hetherington, 1999; Kelly & Emery, 2003).

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Family instability may further alter parenting quality by creating residential instability, change in social networks, loss of economic resources, and socio-emotional adjustments (Cooper et al., 2009; Hogan & Kitagawa, 1985; Astone & McLanahan, 1994); these changes in turn are likely to affect parents' ability to be responsible parents.

Religiosity and Physical, Social, Emotional, and Academic attainment Outcomes

The institutions of religion and family are closely linked, and research suggests that religious beliefs and practices are associated with relationship quality and stability (Call

and Heaton 1997; Edgell, 2006). Religion also helps to shape parental values and practices (Bartkowski and Ellison 2005; Bartokowski and Xu 2000; ibid 2006; Petts 2007; Op.cit 1998). Thus religion affects family life and hence child outcomes.

There is sizable body of research, suggesting that religion may strengthen families by providing opportunities for family members to interact with one another, resources for building and maintaining healthy relationships, parenting guidance and support and a moral community that helps to promote feeling of connectedness with others (Abbott et al. 1990; Alwin 1986; ibid 2006).

Furthermore, research suggests that, religious activity may encourage parents to be more involved in their children's life. (Mahoney et al. 2003; Petts 2007). Children benefit by being immersed within a larger moral community that reinforces the teachings provided by parents and further promotes healthy developmental behaviors (Bartkowski et al. 2008; Myers 1996; Smith and Denton 2005).

Research findings indicate that, aspects of religious belief, affiliation, and practice also play a role in supporting psychological, emotional, and social wellbeing (Ellison 1991, 1995; St. George & McNamara 1984) and that, religiosity is positively associated with levels of happiness, excitement, and satisfaction with life (St. George & McNamara 1984). Further, a strong religious faith appears to act as a buffer against stress and the negative effects of trauma (ibid 1991, 1995). However, the importance of religiosity may be contingent upon race, ethnicity, family composition (Ellison 1995; Jackson 1997; St. George & McNamara 1984). Ellison (1995) suggests that religiosity may, in general, play a more important role in the well-being of ethnic minorities than that of whites. According to Wilcox (2001), Parents who are deeply religious stand a better chance of

creating the kind of home environment and practicing the parental virtues that promote character in their children. On average, they make considerable sacrifices to spend time with their children, to discipline their children in a spirit of self-control, to keep their marriages together, to deal with their children in an affectionate way, and to oversee their children's social life. Given the fact that virtually every parenting outcome associated with religious practice has been shown to have a beneficial effect on children, these sacrifices translate into higher levels of religious, moral, social, and psychological well-being among children who grow up in religious homes.

Family size and Physical, Social, Emotional, and Academic attainment Outcomes

Works done in social science have shown that the family structure in childhood shapes adults' educational attainment, occupation, and poverty (Biblarz and Raftery 1993; Biblarz, Raftery, and Bucur 1997; Eggebeen and Lichter 1991; Hao 1996). Family size has profound effects on adolescent educational outcomes (Downey 1995; Op.cit 1985; Sanderfur and Wells 1999). This relationship is largely attributable to the dilution of resources that occurs as families grow in numbers (ibid 1995; Thomson, Hanson, and Op.cit 1994). Parents have finite material and nonmaterial resources, and additional siblings dilute the amount that can be devoted to each child. As family size increases, each child enjoys a smaller proportion of the financial resources that are devoted to education and other-childhood activities. Likewise, the nonmaterial resources (e.g., time and energy) that parents devote to their children are diluted in larger families. These processes are likely to minimize the resources available to each child and they are likely to have a negative effect on them. (Keister, 2003).

The literature on family structure has documented a strong link between sibship size (number of siblings) and well-being in adulthood. As family structure changes, finite family resources can be applied more generously or less generously to achieve individual and family objectives. As families grow, parents have fewer resources to invest in each child, and each child thus fares worse, both immediately and over time. Additional siblings dilute three critical resources: material resources, opportunities, and parental attention and intervention (Blake 1981; Hill and Stafford 1978; Stafford 1996). The negative effect of family size on the availability of material resources is relatively direct, and the effect on the child is evidenced both immediately and over time (Blake 1981; Teachman 1987). Larger families have fewer resources available for education, home improvement, books and newspapers, dance and music lessons, foreign travels, and other experiences that contribute to intellectual development (Blake 1989). Similarly, nonmaterial resources are diluted in larger families. That is, parental involvement, encouragement, intervention, and opportunities to engage the world are all vital to wellbeing, and these are less available to children in larger families than to those in smaller families.

Family size also reduces the nonmaterial resources that affect children's educational attainment and other aspects of their lives (ibid 1981, 1989, Devereux and Salvanes 2005; Conley and Glauber 2005). In larger families, the time that parents have available to assist children with homework, to create educational opportunities, to encourage their children, and nurture and provide positive reinforcement is reduced. Similarly, when more children compete for attention, parents have less time to intervene when any one of the children is rebellious or delinquent, or otherwise gets into trouble. Likewise,

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children's opportunities to engage the world, that is, to interact with others and to become involved in meaningful activities that feed into later life outcomes, can be decreased in larger families. Researchers have shown that these nonmaterial resources are critical for children's development and can contribute significantly to their physical, emotional, social and academic attainment well-being. In their absence, attainment is likely to be reduced (ibid 1981).

Lloyd (1994) has further argued that the resources available to a particular child are not the same as average family resources because siblings arrive in the family sequentially and experience childhood differently from the point of view of family resources and sibling composition. Even the most egalitarian of parents will have difficulty equalizing resources among children over time.

Desai (1992) for example, has found that in comparing three Latin American and Africa countries, being born into a large family in Latin America has a significant negative impact on children's nutritional status. In African countries however, there was no consistent relationship between family size and child nutritional status. The culture of the family and context therefore cannot be ignored in examining the impact of household structure and resource dilution on child well-being.

Adolescents' characteristics

Adolescents' characteristics such as age, educational level, gender, birth order and ethnicity affect their social, physical, emotional and academic attainment levels. If parents have rigid notions about sex roles or perceive different opportunities available to boys and girls, they will treat boys and girls differently. This differential treatment is often based on the number of siblings and therefore children with fewer siblings are

likely to receive more equal treatment. The cultural context as well as the particular dimension of child investment under consideration determines whether earlier or late children are favored. Investments in a particular child are therefore influenced by the child's individual characteristics- gender, educational level, birth order etc. (Lloyd 1994).

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2.3.3 IMPLICATIONS OF FAMILY STRUCTURE

Some people consider having children within marriage and preserving the sanctity of marriage as essential societal functions. The importance of marriage based on research indicates that married adults tend to be wealthier, healthier, live longer, and have more social support than unmarried adults. (Saxton, 1993: Ballantine, 2003) Others argue that changes in family structure are inevitable and represent "new" family forms that are not necessarily inferior family forms for raising children. Still others take a policy perspective, arguing that reducing the number of single-parent families would reduce the economic burden on the taxpayer, and this is a goal of current welfare reform law in developed nations. Despite this disagreement, at the heart of these concerns, and cutting across many different perspectives, is the well-being of children.

Research on family structure is consistent: the majority of children who are not raised by both biological parents manage to grow up without serious problems. Yet, on average, children in single-parent families, children who experience divorce, and children who live in stepfamilies all experience worse outcomes, on average, compared with children who are brought up with both biological parents. (Chelin, 2009)

There are many possible explanations for these patterns. A stressful life event perspective posits that family structure transitions cause instability in family routines and therefore are detrimental to both parental and child well-being. (Magnoum and Berger, 2009) Indeed, multiple family transitions themselves increase a child's risk of externalizing and internalizing behavioral outcomes (Amato, 2005). A parental absence perspective suggests that biological parents are the most likely to provide social and economic resources to their own children, and therefore the absence of a parent puts children at risk of diminished well-being. A selection perspective suggests that the characteristics that predate family transitions are actually responsible for negative effects. An economic resources perspective would posit that children are at a greater risk of living in poverty and having poor outcomes when they do not have access to two parents in part due to the economies of scale involved in maintaining one household as compared to two.

Indeed, compared to children who live with two married parents, those whose parents divorce are more prone to academic and behavior problems, including depression, antisocial behavior, impulsive/hyperactive behavior, academic achievement, and school behavior problems (Chelin, 1999).

Advances in data collection, namely longitudinal surveys that collect data on the same children over multiple time points (in the USA), have shown that many of the problems that are observed in children post-divorce can actually be attributed to pre-divorce factors—this is often referred to as selection bias. For example, parents with anti-social personalities are more likely to both administer poor parenting and also divorce, and therefore the observed relationship between divorce and child well-being is due, in part, to parental characteristics. Using longitudinal, national survey data, Cherlin and

colleagues (1991) demonstrated that much of the difference in well-being scores between children of divorced and intact families is apparent prior to the date of divorce.

Numerous studies indicate that parental conflict is detrimental to child well-being, and a handful of studies measuring both divorce and marital quality have shown that children from high-conflict families are better off on a number of outcomes when their parents' divorce rather than remain married. However, it has been estimated that fewer divorces are preceded by high conflict than are preceded by low conflict. It is also noteworthy that the differences between children of divorced and intact couples, although arguably small at about one-fifth of a standard deviation, tend to remain significant, even after accounting for important pre-divorce factors. Further, due to the variability in the capacity of children and families to cope with divorce, this average "small" effect likely masks larger effects among certain subgroups of children.

An additional advance in research on children of divorce is the investigation of outcomes that might occur later over the life course when they are adults. For example, research has shown that children whose parents divorce are more likely to experience divorce themselves as adults, to have increased marital problems, and lower socioeconomic achievement and to report poorer subjective well-being.

Stepchildren do not do well on average, as children living with both biological parents. A review of the literature suggests that, on average, stepchildren have lower grades and scores on achievement tests, and have greater internalizing and externalizing behavior problems. They fare worse in terms of dropout rates, school attendance, and high school completion. Similar to explanations for the effects of divorce on children, researchers

often posit that the stress of reorganizing as a stepfamily is an important reason for these differences. Children often move to new cities and possibly lower-quality schools; children in stepfamilies have likely experienced a number of other family changes; and conflict might still exist between the child's original two parents. In addition, children in stepfamilies are found to have less access to parental involvement than children living with two biological parents. Not only might a child's biological parent be distracted and focus attention on her/his new spouse, but stepparents tend to spend less time with stepchildren than biological children, and relationships with absent biological parents, namely fathers, tend to diminish with time.

Children in single-parent families are about twice as likely to have problems as children who live in intact families headed by two biological parents. Children born to unmarried mothers are more likely to be poor; they are more likely to grow up in a single-parent family, and again more likely to experience multiple living arrangements. These factors, in turn, are associated with lower educational attainment and high risk of teen pregnancies.

It is important to note that the implications of single-parent family structure can differ for children in other countries. For example, single parenthood has been found to be less detrimental for children's academic achievement in countries where family policies equalize resources between single- and two-parent families (Chelin, 1999).

2.3.4 Changes Over time and Contemporary Research issues

The study of family structure and child outcomes has paralleled the changing demographic trends in children's families. Research has shifted from a focus on the effects of divorce on children to an increasing focus on the diversity of family structures, especially those other than the biological two-parent family as a setting for bearing and raising children.

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As described above, the majority of nonmarital births are to couples who are romantically involved at the time of the birth. While most unmarried couples have plans to stay together and get married around the time of the birth of their child. One year later only 9 percent were actually found to marry, while another 49 percent of parents continued to be romantically involved. In general, cohabiting relationships are more likely to break up than marriages. (Manning, 2002). Parents of children in cohabiting unions typically have lower earnings, lower levels of education, higher rates of poverty, and elevated rates of incarceration, substance use, and domestic violence, compared with parents of children in married-couple families.

As divorce has become more common, so has the study of how custody after divorce affects children. It is not clear whether joint physical custody of children is beneficial, and frequency of father visitation is not consistently linked with better child well-being. (Amato, 2000). While more work is needed, some research suggests that contact with a non-resident father is beneficial when conflict between parents is low or when the non-resident father is warm but sets limits in his parenting.

Gay marriage and family life has received much attention, but research on gay families is still in development. In the United States, census questions in 1990 and 2000 included categories that made it possible for researchers to identify same and different-sex couples in "marriage-like" relationships, but even these are not direct measures, and the census data do not include child outcome assessments. It is rare for any national data set to collect information on gay couples let alone match it to children in the household. Nonetheless, in their 2000 Census, approximately one-third of female householders with same-sex partners were living with their own children, and about one-fifth of male householders with same-sex partners were living with their own children. Marriage between same-sex partners gained particular relevance in 2004 and attempts were made to confine marriage to heterosexual couples as a constitutional amendment. In terms of child development, rigorous research on representative samples is lacking.

2.3.5 Methodological Issues

There are at least three clear methodological issues in the study of how family structure affects child outcomes. First, addressing selection bias is perhaps the most critical issue. Longitudinal data are critical here.

A second critical methodological element is that when children experience one family structure outside of the traditional married two-parent family, they typically experience multiple changes. Therefore, it becomes difficult to disentangle the effects of previous family transitions, such as divorce, from the effects of current family structure, such as a stepfamily.

Third, data quality has not "caught up" with the many different types of family structures in which children live. Knowing a mother's marital status is not enough information to determine whether she is living with her child's father, or whether all children in the household share the same father. It has become increasingly critical to understand the biological connection of these children to the people in the household, as well as the marital status of that child's parents, and also the timing of parental marital/cohabiting/dating transitions. This seems straightforward and there are very few data sets that collect such information (for an exception, see the Survey of Income and Program Participation), and it is even more of a rarity for child outcomes to be assessed in the same data source.

Further development is also necessary to accurately measure parental cohabitation. For example, couples who are living together do not necessarily identify with the terms "cohabiting" or "unmarried partner" on questionnaires. This situation illicit response bias in data.

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2.7 THEORETICAL FRAMEWORK

This study is grounded in selected theoretical framework. Below is a discussion of five selected theoretical perspectives that explains the organizational dynamics of family structure in the study.

Family systems theory

A system is a set of interconnected parts that exhibits some boundary between itself and the surrounding environment. (Haralambos & Holborn, 2007) Families may be considered as systems, as they are in the systems framework. (Sameroff 1997, Cox & Paley, 1997) Assumptions of the systems framework include the idea that all parts of the system are interconnected; inter-related and interdependent. Sub-units maintain their boundaries, perform specific functions and comply with specific rules that harmonize with other sub-units to ensure system function and stability. Family systems are influenced by the environment and vice-versa.

Family processes are understood as the product of the entire system. Family systems theory therefore shifts the primary focus away from the individual family member toward relationships among the members of the family system. The systems approach to the intact families and divorce families helps prescribe a holistic intervention to the family.

When a family faces a new situation, such as divorce or remarriage, patterns of interaction and communication within the family are less stable and predictable. Thus differences are expected between families moving through a transitional or adaptation

process compared with families that have established patterns for relationships and coping (Minuchin, 2002).

The whole of family functioning is considered to have an indirect impact on adolescents' development because the quality of interactions within family subsystems (such as parent-adolescent relationships and the co- parental relationship) is thought to be governed, at least in part, by the whole-of-family context (Johnson, 2001).

Taking into account the interconnectedness, interdependency and the interrelatedness of the systems' theory it is worthy of note that within the family setup no one lives in isolation. Whatever affects one part or sub-system automatically affects the entire system. The behavior of each sub-system or unit (behavior of the adolescent) can be explained and understood by the composition of the family and to the degree to which it functions. Disruptions within the family setup such as divorce, death, migration, among others, disturb the entire system and threaten the family processes and functioning and this causes the whole family to suffer.

Parental divorce brings about change in the family processes. The custodian parent embarks on multiple roles to meet the expectation of the family. Implications of this put much stress on him/her and may have limited resources at their disposal and at the same time there is increase demand on family income and time. Low income levels means that there is not enough household income to finance educational expenses and this can affect the academic attainment outcomes of their children.

Parental stress experience as a result of divorce causes both internalizing and eternalizing behavioral problems (Lauer and Lauer, 2000). Parental conflict also contribute to family

system malfunctioning. According to Baxter and Weston (2011), adolescents experiencing parental conflicts are more likely to experience a range of emotional and behavioral adjustment problems and perform less academically.

The concept of boundary is an essential one in systems thinking. Systems theorists have therefore been interested in the issue of boundary redefinition when spouses divorce and remarry. Boundaries are defined by rules that identify who participates in a family, and how they do so. Confusion over boundaries, in other words boundary ambiguity, is thought to create a variety of interpersonal problems within the family. Boundary confusion in families leads to confusion in the rights and duties associated with different members in the family.

The Socialization theory

The child's home provides a social context where learning and socialization take place, and apart from other variables, the quality and characteristics of the home environment have important consequences for child outcomes. (Gottman & Wilson, 2002). A stimulating home environment with opportunities for learning and exploration and that provides warmth and emotional support will foster healthy growth and development of children (Bradley & Rock, 1988). Others have suggested the importance of parental ability to monitor child and adolescent activities as part of their socialization processes that facilitates numerous positive outcomes in their children (Patterson & Fisher, 2002). In all these ways and more, children whose parents exemplify more favorable parenting strategies are more likely to develop well. Should these aspects of parenting be found to vary across family types, socialization might be expected to confer relative advantages or

disadvantages to children living in different family structures. When two parents are present in the adolescent's home, they share the responsibility of monitoring the adolescent's activities and provide encouragement and discipline as needed. When parents live apart, the residential parent often becomes the primary (or sole) provider of both economic and parental resources, and thus competing time demands necessarily entail less investment in monitoring and socializing children. The nonresidential parent is less proximate to the activities of the child and therefore has less regular interaction and involvement in day-to-day activities.

Parental involvement, monitoring, coaching and warmth that manifest in the socialization processes make adolescents feel accepted, love, open and free to communicate their feeling to their parents (Francesconi & Ermisch, 2001). They tend to have strong cohesive bonding with their families and are able to integrate/participate well in the larger society and are able to do well academically. Adolescents who do not get such an exposure form their parents tend to be reserved, fearful timid, quiet hostile towards their family and other people anxious, depressive etc. academically not too stable.

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The Social Stress theory

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Social stress theory (Kahn, 1992; Osborne & McLanahan, 2007; George, 1993) holds that changes in family organization and circumstances cause stress in children's lives; this is because changes may lead to modifications in family dynamics, organization, and roles that yield behavior modifications for both children and adults (Elder, 1974; Hill et al., 2001). Consistent parental conflict or divorce, sickness or death may directly increase adolescent's stress because of observed conflict and tension between their parents,

changes in household composition, or changes in residential location. In response to difficulties at home, adolescents may disengage from the home environment and receive less parental nurturing and socialization and may be more susceptible to negative peer influences. Some researchers have posited that the stress of family change is cumulative because any disruption requires re-adaptation, and therefore the number of family transitions has greater negative consequences for adolescent than any particular family structure experienced (Amato, 1993; Wu & Martinson, 1993).

According to (Van der Doef, 1998), stress can be caused by, death, serious illness or accident of a family member, divorce, financial strains etc. and this can arise from within or without the family. It can be expected or unpredictable, controllable or uncontrollable. When a family faces a new situation, such as divorce, patterns of interaction and communication within the family are less stable and predictable. Irrespective of the type of stress faced with a family, it put much strain with negative consequences on adolescent behavioral outcomes. Strains are the psychological, behavioral, and physiological outcomes of stress and it may include diverse responses as anxiety, depression and illness. Strain as a result of stress is associated with decreased healthy eating habit in adolescents (Tstsumi et al, 2003). According to Kahn and Byoiere (1992), adolescent manifest stress in terms of physiological, psychological and behavioral outcomes.

Stress overtime can have significant negative effects on the health and immunity of adolescents with decreased potential adaptiveness of the immune system. Elder, 1992 posits that stress in the family increases aggression and depression among adult children. a study conducted by Nada-Rada (1995), revealed that a wide range of social, psychological as well as behavioral problems are experienced in adolescents and

adulthood and this go a long way to have negative influence on their academic achievements.

Changes in family structure are typically accompanied by changes in economic, time, and parental resources; this in turn place stress on families and thus adversely affect child outcomes.

Family instability also yields residential instability and a sense of insecurity concerning household rules (Amato, 2000; Cavanaugh & Huston, 2006; Kelly & Emery, 2003; Osborne & McLanahan, 2007; Magnuson & Berger, 2009).

Parental divorce brings about a wide range of social and psychological problems in adolescents (Rodgers 1998; Fergusson, Diamond, and Horwood 1986; Feehan, McGee, Williams, and Nada-Rada 1995).

Empirical studies show that family instability is associated with lower child cognitive scores, increased behavioral problems, and poorer health (Cavanagh & Huston, 2006; Fomby & Cherlin, 2007; Osborne & McLanahan, 2007; Magnuson & Berger, 2009). Nevertheless, family structure at birth still has an influence even when stability is taken into account (Cavanagh & Huston, 2006; Osborne, Manning & Smock, 2007; Raley & Wildsmith, 2004). Carlson & Corcoran (2001) found that children born to single parents had more behavioral problems and lower cognitive scores regardless of whether their family structure was stable or unstable since birth.

Another reason to take both birth status and stability into account is that the risk of instability is related to initial family structure (Osborne, Manning & Smock, 2007; Raley & Wildsmith, 2004).

The Symbolic Interaction theory

The symbolic interaction framework emphasizes the importance of individual perceptions of the interactions that occurs among family members. The family is seen as a "unit of interacting personalities," a living, growing and a changing entity. Within the family, each member occupies a position or positions (e.g., first child, mother) to which they are assigned roles (e.g., provider, caretaker). Each individual perceives the assigned role(s) and the role expectations held by other family members in her or his own way. This framework helps explain why parents and adolescents perceive communication and family dynamics differently. The framework suggests that family cannot be understood by external observation alone. Rather, it must be understood in the context of how participants perceive situations. This view also suggests that, human relationships are more than the sum of personal ties that make them up.

Symbolic interactionism rests on three simple premises. First, human beings act toward things on the basis of the meanings those things have for them. Symbolic interactionists therefore believe that social behavior, is explained by the meaning that actors assign to the situation and action. Second, the meanings that people assign to the objects in their environment are drawn from the social interactions in which they engage. That is to say, we do not simply form our meanings as a result of psychological elements in our personalities, but other people's actions define the meanings for us. Third, the meanings of things are handled in, and modified through, an interpretive process. There is a process of interaction that goes on within the individual, as people engage in an internal conversation about what things mean and how they should respond.

One of the most basic concepts in symbolic interactionism is that of role. Roles are the rules of behavior for positions in a family, and as such they are taken into account by individual members as they construct their lines of action. Symbolic interactionists believe that individual behavior can only be understood within the context of the family role that the individual occupies. Interactionists work on patterns of family life includes studies of the ways in which behavior is negotiated and renegotiated among family members. It is through negotiations that members adjust their individual claims to produce joint actions.

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Family Ecology theory

A concern with individuals and their environment is at the heart of the ecological approach. According to Bronfenbrenner (1998), Child development takes place through processes of progressively more complex interaction between an active child and the persons, objects, and symbols in its immediate environment. To be effective, the interaction must occur on a fairly regular basis over extended periods of time. The ecology theory acknowledges that, a child affects as well is affected by the environmental settings in which he spends time. The most important setting for adolescent is his family, friends, teachers and church mates, because that is where he spends the most time and because it has the most emotional influence on him. Other important settings may include his extended family, early care and education programs, health care settings and other community learning sites such as neighborhoods, libraries and playgrounds. The number

and the quality of the connection between the settings in which the child spends also have important implication for his development

Adolescent behavior is then seen as a function of the interaction between their traits and abilities and their environment. One of the most popular ways of thinking about this is to conceive of the nested ecosystems in which the individual human being develops. First, there is the microsystem which reflects the immediate relationships and attachments experienced. All relationships are seen in this model as bi-directional and reciprocal, so adults affect children's responses but children's characteristics and behavior also influence adults' actions. These connections between persons who are present in the immediate setting of the child directly affect his development.

Second, there is the mesosystem consisting of linkages between settings in which the developing person or the child actually participates. Brofenbrenner (1997, 1998) believed that no family can exist in isolation. The connections with settings such as the extended family, the school, among others are significant to child development. Research (Runyan et al. 1998) has shown the crucial importance of strong support networks for physical health and well-being. For example, an adolescent emotional state could easily be affected by either the positive involvement or the tension between a parent and the school. The mesosystem includes community involvements and this has been shown to be especially important for the whole family. Research (Johnson & Molloy 1995) shows

that mothers are less likely to suffer from depression if they have a strong network of support.

Third, there is the exosystem that consists of linkages between settings that do not involve the child as an active participant, but in which events occur that affect, or are affected by, what happens in the setting. That is, influences that may impact upon the child's well-being less directly, but often forcefully. The parents' workplace is situated in the exosystem and if, for example, a parent was experiencing stress at work this may well impact upon the child, who might reflect the stress by developing difficult behaviour, resulting in more stress being placed upon the parents.

Fouthly, there is the macrosystem consisting of overarching patterns of ideology and organization of the social institutions common to a particular culture or subculture. The macrosystem thus, represents the culture, values and laws of the society in which the child lives. Culture could be defined as the 'rules and tools' of a society and, within that, the ways in which childhood is constructed and understood.

The final system that Bronfenbrenner added to his ecological systems theory is the chronosystem, which refers to the influence of the passage of time. The child will change over time due to maturational processes, but these changes will also be influenced by the 'history' and culture of the family and wider community. Intergenerational influences will have an indirect impact on the child well-being. The chronosystem reflects the

impact of prior life events on later development, although these will be experienced and interpreted in unique ways by each individual.

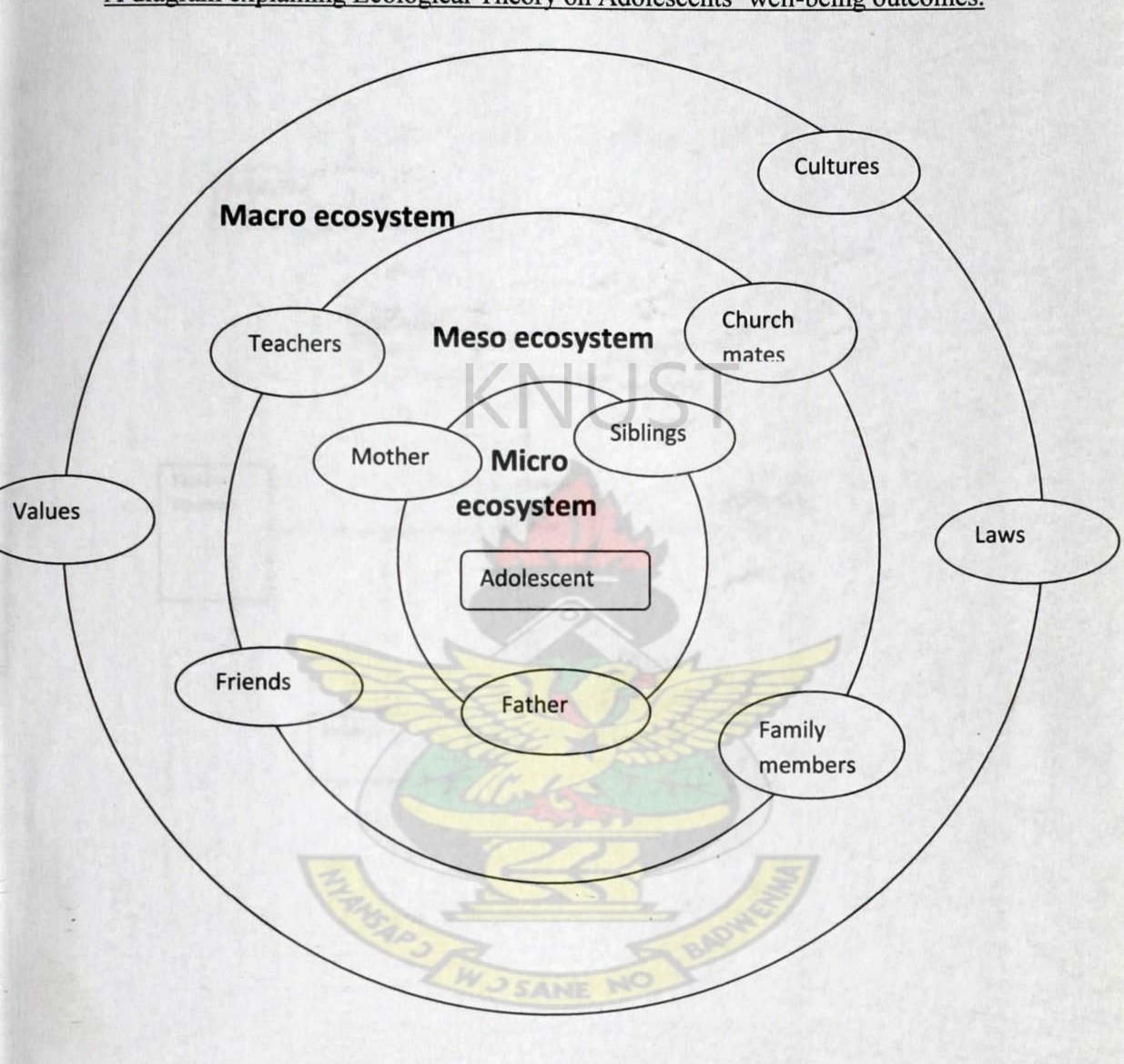
Conclusion

This chapter reviewed the extant literature and theoretical basis on the effects of family structure on child well-being. The review sought to identify key mechanisms that linked family structure and child well-being.

The extant literature revealed that in general, adolescents in Single-parents families have been found to have poorer outcomes compared with those in intact families with both biological parents. Differential resources have been identified as the main process through which family structure affects adolescents' outcomes (Ross, Mirowsky, & Goldsteen, 1990; White and Rogers, 2000). Thus, single-parent families have fewer resources at their disposal than do two-parent families do. The study is grounded in five theoretical perspectives namely thus the systems theory, the socialization theory, the social stress theory, the symbolic interaction theory and the ecological theory. The review concludes with a conceptual framework that explains the study.

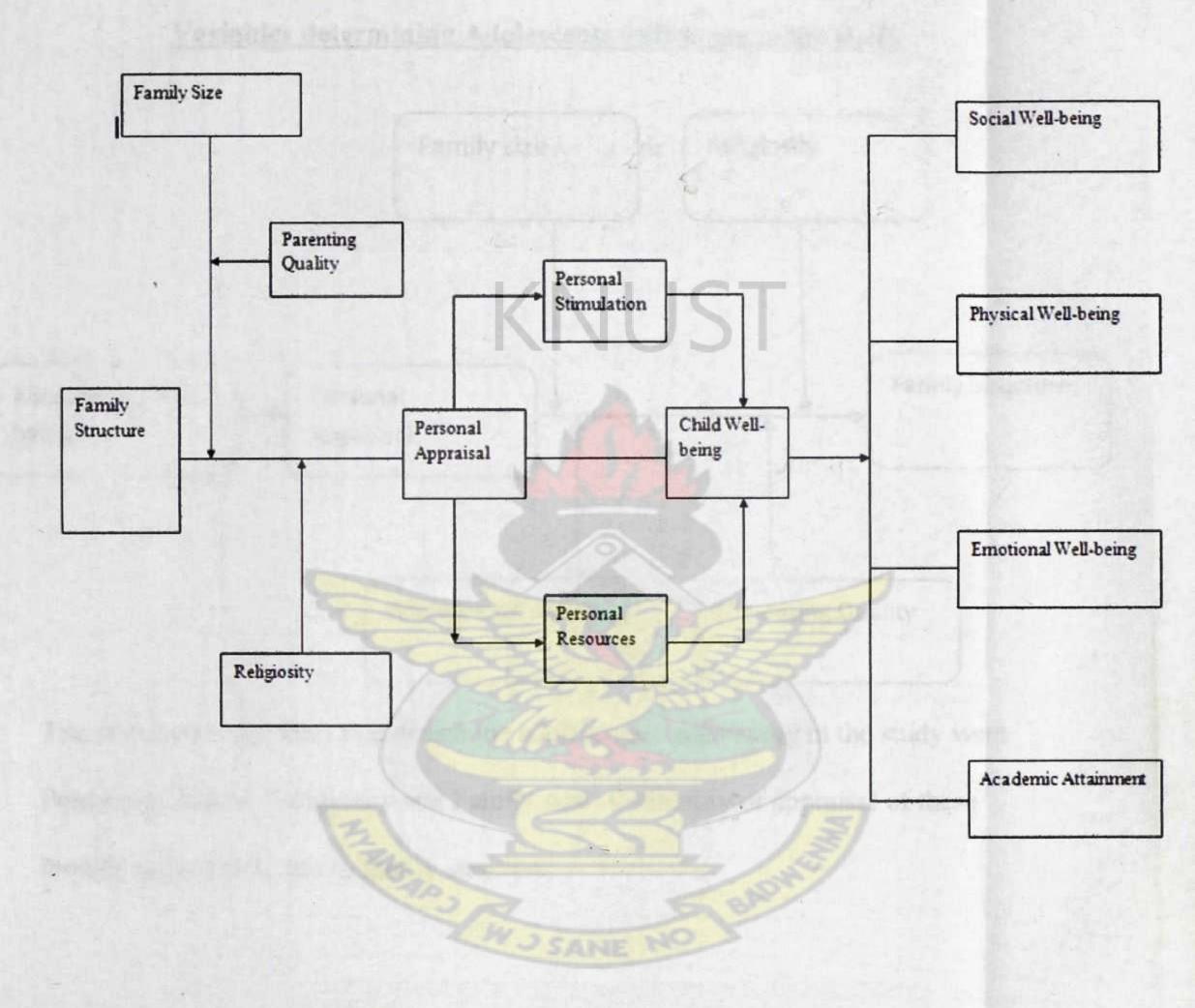
A diagram explaining Ecological Theory on Adolescents' well-being outcomes.

Figure 2.1



Ecological factors interact among themselves and interact individually on the adolescent to explain educational, emotional, social and physical outcomes.

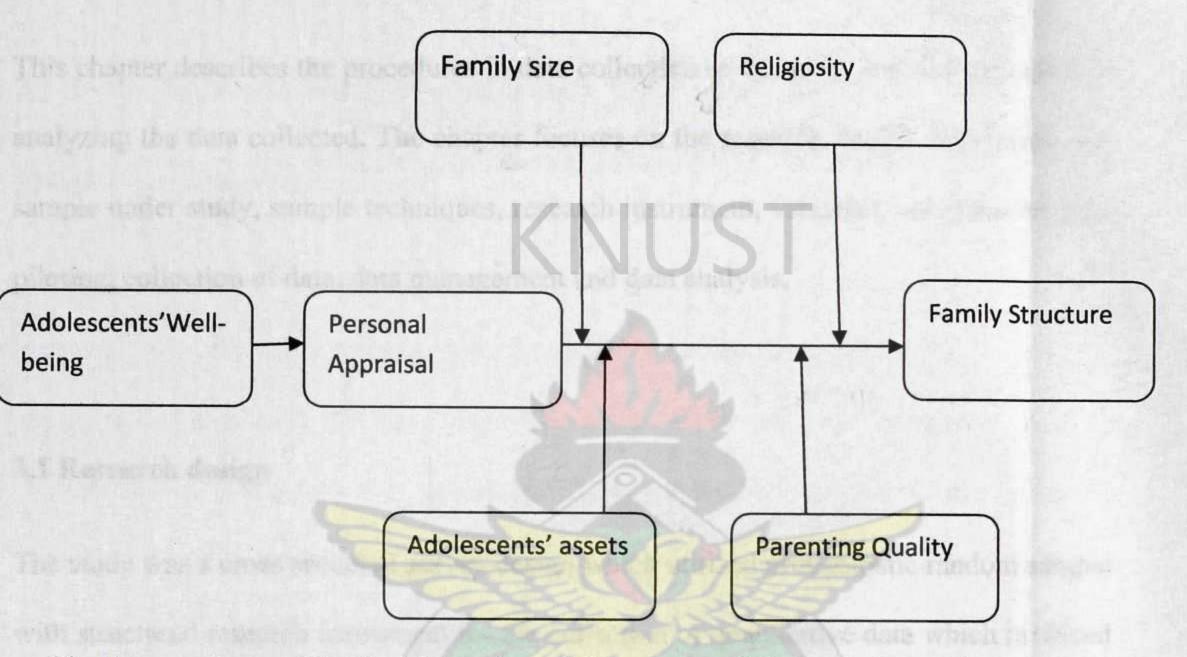
Figure 2.1: A conceptual Framework showing the effect of the family structure on adolescents' physical, social, emotional and academic attainment well-being.



The figure above shows a conceptual model of family structure and adolescents physical, emotional, social and academic attainment outcomes. Depending on the type of family the adolescent may find himself/herself, whether father present or father absent have a wide range of experience as a result of the interactional effects of some family variables such as family size, parenting quality and religiosity. The

adolescent's appraisal, assimilation and appreciation of the situation will be translated to his or her well-being, as physical, social, emotional and good academic attainments.

Variables determining Adolescents well-being in the study



The three main variables that determine adolescents' well-being in the study were Parenting Quality, Religiosity and Family size. Variability of appraisal of these mediating factors is due to family structure.

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CHAPTER THREE

METHODOLOGY

3.0 INTRODUCTION

This chapter describes the procedures in data collection of the study and methods used in analyzing the data collected. The chapter focuses on the research design, population and sample under study, sample techniques, research instrument, variables and measurement, piloting, collection of data, data management and data analysis.

3.1 Research design

The study was a cross sectional survey design which utilized probabilistic random sample with structured research instrument for the collection of quantitative data which involved multiply variables that were examined to detect patterns of association.

3.2 Description of study area

Cape Coast is the capital of Ghana's Central region. It has a total population of about 82,291 (2000 Population and Housing Census) people.

Formal education in Ghana originated from this place and a lot of leaders have been trained from here due to the training facilities it has. People travel far and near Ghana to experience the quality and rich education from this historic town which was the first capital town of Ghana. Cape Coast is Fanti spoken land, predominately occupied by the Fanti's. The main occupation of the people living in Cape Coast is mostly fishing, fishmongering, and Kenkey preparation; majority of the natives engage themselves in these activities whereas the other are employed in the service sector.

3.3 BRIEF DESCRIPTION OF THE SELECTED SCHOOLS

Mfantsipim Senior High School

Mfantsipim was the first senior high school to be established in Gold Coast in April 1876. It moved to its present location at Kwabotwe hill in the northern part of the town, at the top of kotokuraba road in Cape Coast. The school sometimes has been referred to as "Kwabotwe" for this reason. It was establish by Wesley Missionaries as the Wesleyan High School with donations from local businessmen and the support of the Methodist Missionary society in London. It was establish to train teachers and began with 17 pupils.

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The name "Mfantsipim" was provided by Honourable John Mensah-Sarbah, an accomplished lawyer and a member of the "PIONEER BOY". Mfansipim means "a countless number of fantes". Later the Wesleyan High School changed its name to Wesleyan collegiate school before the end of the 19th century. The aim was to train Godfearing, respectable and intelligent lads. The school currently has about 2500 students with staff of about 95. Mr. Kwame Mieza Edjah is the current Head master. The school has facilities such as science laboratory, computer center, well-built dormitories, library, and school clinic among others.

Ghana National College

Ghana National College was founded on July 20, 1948, and was staffed with dismissed teachers from St. Augustines College and Mfantsipim. The college was founded by the first Ghanaian president Osagyefor Dr. Kwame Nkrumah using his own funds, for eight students who had been expelled by the British colonial administration from St. Augustine's college.

The school had Mr. Kwesi Plange as their first headmaster from the year 1950-1952. Dr. Nkrumah named the school "Ghana National College" when he gave the name Ghana to the Gold Coast. The school has programmes such as Science, Business studies, General Arts and Vocational skills. The school is also endowed with library, computer center, and science laboratory.

Academy of Christ the King

Academy of Christ the King is one of the well endowed Senior High Schools in Cape Coast. It is a mixed school and has students population of about 1590.

The school offers programmes such as, Business studies, General Arts, Economics and Government. The entire students' population is about 1590. Academy of Christ the King is endowed with a library.

Pitmas High School

Pitmans Senior High School is one of the oldest private schools in the Cape Coast District has Mr. Pitmans as the proprietor of the school. It is a mixed school with student population of about 750.

Currently, the school has been relocated from Bakano, its initial place of establishment to Ola estate. The school has programmes such as Business studies, Business for Secretariat, Visual Arts and Home Economics. The school has a library and hostel facilities.

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Commercial Secretariat Institute

The Commercial Secretariat Institute is situated at Kwabotwe hill top in the Cape Coast town. It was established mainly to equip students with secretariat skills. The school is a mixed one and has a population of about 550. The school has facilities such as typing pool and hostels.

3.4 Population and Sample

The target population of this study is students in the Senior High schools. In all five schools in the Cape- Coast Municipal District were selected. These schools were randomly selected from the five categories of Senior High Schools we have in Ghana. A well endowed mixed school, a less endowed mixed school, male sex and a female sex school representing all the categories of Senior High Schools in Ghana. In all a total population of about 395 was considered for the study.

3.5 Sampling technique

The study was designed to gather data from selected schools in the Cape Coast Municipal District. In Ghana the Ministry of Education has grouped all Senior High Schools into five (5) broad categorized forms of stratified groups. Each stratum of schools has a specific listing of Senior High Schools. Schools in each stratum were randomly selected for the study. Categories of these schools can be found in appendix C.

In the first stage of the sampling, all the categories (A-E) of schools were stratified into stratum A, stratum B, stratum C, stratum D and stratum E. The names (lists) of all the schools in each stratum were ascertained. Sampling was then carried out separately in each by simple random. Among the category A schools Mfanstipim Senior High was selected, in category or stratum B, Ghana National College was selected, in stratum C Academy of Christ the King emerged as choice, in the forth category – D, Pitmas High Schools was selected and finally in the E category Commercial Secretariat Institute (CSI) was selected, thus all the schools in each category had equal chance of being selected for sample. Below is found the entire population of each of the schools included in the sample.

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3.4.1 Population Characteristics of the Selected Schools

Category of	Randomly	Population of	Number of	Percentage
Schoos	selected SHS	Students	student selected	
A CST	Mfantispim	2600	130	42.8
В	Ghana National	2400	120	36.5
Charles	Academy	1590	78	15.7
D landamin the	Pitmans	750	38	3.6
E	CSI	550	28	1.9
3.4.2. Students por	station and lemple	7890	395	100

In the second stage of the sampling, a sample size of 395 was drawn. This considered 5% of each school's population which also constituted 5% of the entire population of about 7890 under study. The selection of these 395 students (sample size) was accomplished by carrying out sampling operations independently within each school. Sampling was done across students' forms and programmes of study. Student lists was ascertained from each of the five schools, a sampling interval of 20 was used for the selection of sample in each school. This was calculated by dividing each school's population by its sample size. Students were then sampled randomly by the simple random technique of data collection based on their various school lists. The process is illustrated below:

Mfantsipim High

Sampling Interval = Population size = 2600 = 20

Sample size 130

Ghana National College

Sampling Interval = Population size = 2400 = 20

Sample size 120

Academy of Christ the King Sampling Interval = $\underline{Population \ size} = \underline{1590} = 20$

Sample size 78

Pitmas High School Sampling Interval = $\underline{Population \ size} = \underline{750} = 20$

Sample size 37.5

CSI Sampling Interval = $\underline{Population \ size} = \underline{550} = 20$

Sample size 27.5

Thus in simple random, every 20th element in the total list for all the schools was chosen for inclusion in the sample. (Babbie & Rubin, 2008)

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3.4.2. Students population and sample size of each school

SCHOOL	POPULATION	SAMPLE
Mfantispim High School	2600	130
Ghana National College	2400	120
Academy of Christ the King	1590	79
Pitmas High School	750	38
CSI	550	28
Total	7890	395

3.6 Research Instrument

The research instrument for data collection was the questionnaire. Although a number of measuring scale on family research avail, majority of the existing scales were crafted for foreign samples and are not culturally friendly with Ghanaian samples. Besides, more

existing culturally friendly scales were designed for latency and young adolescents' population.

Formulated research questions and hypothesis were basically informed the development of research items in addition to reference made to several instruments and scales that have been made in similar studies [e.g. Adolescent Family Inventory of Life Event and change (A-FILE) 1992; Emotional Social Loneliness Inventory (ESLI) 1987; Coping Orientation for Problem Experience (A-COPE) 1991; Adolescents Adjustment Checklist (AAC), 2008]

In addition, a thorough examination of the theories that were relevant to the research questions in order to identify concepts that had bearing on adolescents physical, cognitive, emotional and social well-being were also considered. Finally, questions were crafted in sync with perceived parametric statistical analysis.

The questionnaire was constructed to capture five main domains or sections of the respondents and this is as noted below:

Section A contained 28-items, 7 in each sub scale intended to measure adolescents' physical, social, emotional and academic attainment well-being.

Section B contained 9-items on the socio-demographic characteristics of the respondents.

All the questions were closed-ended questions allowing for easy answering and coding for analysis. The data for this study were drawn from adolescents' own responses.

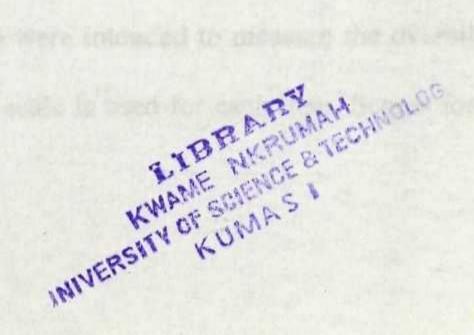
3.7 Pilot test and improvement of draft questionnaire.

The questionnaire was piloted in Aggrey Memorial, a Senior High School in Cape Coast.

The pilot was done to make certain that the research items were appropriate and understandable. Further, it was to identify ambiguity and feasibility in the administration to similar sample. The researcher conducted the study and attended to questions raised by the students. The researcher observed the length of time used in answering the questions.

3.8 Pre-test and Post-test: Measurement of Psychometric properties of the sub-scales.

The instrument was pre-tested in Elite College, a Senior High School in the Kumasi Metropolis. This school was selected for its similar characteristics as the selected schools of the study; post-test was carried out after two weeks. Both the pre-test and post-test exercises were used to evaluate the adequacy of questionnaire, to try out systematically all procedures for the study, to establish and to evaluate codes for questionnaire responses and to gauge the length of the survey. It was also used to establish reliability for the survey instrument (Oppenheim, 1992; reported by Oheneba, 2008). A Pearson Correlation was computed to access the test-retest reliability of individual scores for the crafted research instrument within an eight interval between administrations, r (.60) = .72. This alpha value attests to scale reliability (cronbach, 1990).



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3.8 Ethical Consideration

Frankfort-Nachmias and Nachmias (1992 as cited in Cohen et al 2005) has indicated that, the obligation to protect the anonymity of research participants and keep research data confidential should be fulfilled at all cost unless arrangement to the contrary are made with the participants'. The researcher ensured that, information provided by the participants did not reveal their identity. Not a single information or questionnaire could be traced to the respondents. Respondents' names and any other information that could reveal respondents' identity were not of interest to the research. They were therefore asked not give any of such information.

The participants were told that they have the right to be informed about their involvement in this exercise and they received a thorough explanation beforehand of the benefits, rights, and dangers involved as a consequence of their participation in the research project. (Nachmias and Nachmias 1992 as cited in Cohen et al 2005).

To avoid plagiarism of any form, the researcher acknowledged other works that were referred in the study.

3.9 Variables and Measurement

Dependent variables

The dependent variable for the study is adolescents' physical, social, emotional and academic attainment well-being. These four items were intended to measure the overall wellbeing of the adult child. A common response scale is used for each item. Scores for

each of the items are summed and higher scores indicate a higher level of wellbeing. The sum of these variables helped in the construction of an overall adolescent wellbeing index.

The physical wellbeing index represented the score across 7- items that measure different aspects of physical wellness, has a reliability of .62. Original responses were ordinal in nature, ranging from 1(not at all good) to 5(extremely good). Thus, a higher index score indicates higher levels of physical wellbeing.

The social wellbeing scale consists of 7-items. Here again responses were ordinal ranging

from 1(not at all good) to 5(extremely good). Responses of these items are summed with high scores indicating higher levels of social wellbeing. This index has a reliability of .72

The emotional wellbeing index, with a reliability of .69, similarly represents the mean item score across 7 ordinal items that measures emotional feelings. Throughout this study, a higher emotional wellbeing score once again is an indication of higher levels of

The academic attainment sought to assess the degree to which the child cares about doing well in school. Academic attainment measure has internal reliability of .68. It followed the same pattern as the other well-being indicators.

emotional wellbeing and vice versa.

Independent Variable

Family structure

The study distinguishes two family types: (a) Intact family (b) and single parent family including single -mother and single father- headed families. We constructed a dummy variable to represent these two family types.

Parenting quality

This is measured by the time parents spend with their children, their closeness as well as their involvement in the affairs of their children. The parenting quality variable was measured through an index representing the mean score of 7 questions concerning the adolescent's relationship with their parents or guardian. The responses are ordinal in nature ranging from 1(not at all good) to 5(extremely good). The index's reliability is .60

Religiosity

This is measured by one's commitment and involvement in his or her religious activities and practices Religiosity was measured with 7 questions by respondents who indicated having religious affiliation. These questions were also ordinal in nature ranging from 1(not true of me) to 5(extremely true of me); it has a reliability of .65.

Family size

Family size was measured as a count variable

3.10 Control variable (adolescents Characteristics)

The study also controlled for some characteristics of the adolescents. These variables are likely to be correlated with both family structure and adolescents' well being. Controls are therefore included for the adolescent's own characteristics, including adolescent's age (measured in years), gender, birth order and ethnicity. Age is coded in years. Female is coded as 1 for girls and 0 for males or boys. Ethnicity and birth order were measured using series of dummies.

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Scale Reliability

Alpha
.62
.72
.69
.68
.65
.65

Bertrand (2000) has indicated that a minimum level of 0.60 reliability coefficient for a scale is good and acceptable for quantitative study. The questionnaire for the study deemed good for the study.

3.11 Method of data analysis

This section describes data processing procedures employing in the data analysis. It begins with an examination of data and measurement scale screening followed by a description of statistical procedures used for data analysis and hypothesis testing.

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3.12 Data processing

Quantitative analysis was conducted using SPSS. The investigator engaged in a coding process after data collection. Coding was done on the questionnaire. Data entry was done on an Excel Spreadsheet and later imported onto an SPSS (Statistical Product and Service Solution, 1968) version 16 for window data matrix so that Microsoft Windows XP computer could be used to manipulate and analyze the data.

3.13 Statistical Procedures for the Analysis for Data and Hypothesis Testing

This section discusses statistical procedures used for data analysis and hypothesis.

Preliminary data analysis included obtaining frequency distribution and descriptive statistics for all variables.

The study used inferential statistics to help answer research questions and research hypothesis. Based on the appropriateness, the study used regression.

3.14 Analytic Techniques

The data was analyzed quantitatively by aid of Statistical Product and Service Solution (SPSS 16) software, since it was very convenient for inputting data and organizing data for clear and easy understanding. It enabled the researchers to come out with the final findings of the research. The data was edited for completeness and consistency after which data extraction was performed. Coding of the data was followed by data entry.

Descriptive statistics involving univariate, bivariate was done on the demographic characteristics of the respondents and also on the mediating variables and child well-being. The data was then presented using percentages, frequencies, graphs, tables, ratios, mean scores and interpreted appropriately.

The second part of the analysis involved inferential statistics of multivariate (more than two variables) analysis of the data. Although the data was constructed from responses to ordinal scales, variable indices approximated continuous linear scales that range between 1 and 5; multiple regression was therefore used for the multivariate analysis of the study. Multiple regression analysis was employed to assess survey responses of the students. The use of this analytical tool requires meeting some specified assumptions (Laudau & Everitt, 2004). The following are the assumptions underlying the regression analysis.

3.15 Evaluation of Assumptions for selected Statistical Model

1. Linearity of the phenomenon

Note Patrick description

- 2. Constant variance of the residual or error term
- 3. Independence of the error term

4. Normality of the error term distribution.

The relationship between family structure and adolescents well-being is assumed to be a linear one and this is illustrated as $y = \alpha + \beta X + \epsilon$.

$$y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \beta_5 X_5 + \beta_6 X_6 + \beta_7 X_7$$

y = Overall adolescents well-being (Social, Physical, Emotional and academic attainment outcomes).

 α = a constant amount of adolescents' well-being

 β_1 = the effect of family structure on adolescents' well-being

 $X_1 = Family Structure$

 β_2 = the effect of Parenting quality on adolescents' well-being

 X_2 = Parenting quality

 β_3 = the effect of Religiosity on adolescents' well-being

 $X_3 = Religiosity$

 β_4 = the effect of Family size on adolescents' well-being

 $X_4 = Family size$

Controlling for Adolescents Characteristics

 β_5 = the effect of Gender

 $X_5 = Gender$

=\$6 the effect of age on adolescents' well-being

 $X_6 = Age$

 β_7 = the effect Ethnicity on adolescents' well-being

X₇= Ethnicity

 ε = the error term

This shows a multivariate analysis that model's adolescent's wellbeing using multiple regression.

The above assumptions would be checked in chapter four where the actual analysis of the variables would be done.

Summary

This chapter looked at the methodology used for the study. A survey design was used for the study where primary data was collected. The data was collected from some selected schools namely: Mfantispim High, Ghana National College, Academy of Christ the King in the Cape Coast Municipal District which happens to be the study area. Child well-being was assessed in four domains namely physical, social, emotional and academic. With the exception of demographic variables, all the sub scales contained 7-item questions and were measured on 5-point likert scale. The study used questionnaire administration for the data collection. A pre-test and post test of the research instrument

was first conducted outside the district. Both descriptive and inferential statistics were employed for univariate, bivariate and multivariate summary of results.



mean of the Children is approximately 2.61 with a standard deviation of 1986 A van be-

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CHAPTER FOUR

RESULTS AND DISCUSSION

INTRODUCTION

This chapter of the research presents the empirical analysis of the effect family structure has on child wellbeing in four main domains: physical, social, emotional and academic attainment. This is captured in tables, graphs, bivariate and multivariate regression analyses indicating child characteristics, family structure and its characteristics, and adult children well-being.

Socio-demographic characteristics of Children

For the purpose of this study, only adolescents (12-18years) were interviewed. Information on children and family characteristics which included age, gender, religion and religiosity, birth order, family type, family size, and parenting quality were obtained. Table1.1, the sample size of (N=395) adolescents who were interviewed, 12 of them representing 3 percent were within age category 12-14, 132 representing 33.4 percent were found to be between 14-15 years and 251 representing 63.5 percent were within the category of 16-18 years. For the age variable, the maximum age of the children is within the 16-18 years range while the minimum age is within the category of 12-14 years. The mean of the children is approximately 2.61 with a standard deviation of .548. It can be deduced from the table that majority of the children 251(63.5%) fell within age range 16-18 years.

Table 1.1

Frequency Table of Age distribution of respondents

Age range	Frequency	Percent	
12-14	12	3.0	
14-16	132	33.4	
16-18	251	63.5	
Total	395	100.0	- 71

Table 1.2 below depicts the gender distribution of the respondents. It is seen from this table that 216 representing 54.7 percent of the adolescents sampled for who the study were males whereas the remaining 179(45.3%) were females. The sample is therefore not evenly split between males and females. Greater number of males (55%) participation in the field exercise was recorded than that of females (45%).

Table 1.2

Frequency Table for Adolescents' Gender (N=395)

	Frequency	Percent
Male	216	54.7
Female	179	45.3
Total	395	100.0

Source: Field Survey, 2012

Table 1.3

A cross tabulation for Adolescents' Age and Gender (N=395)

Age	Male	Female	Total
12-14	9	3	12
14-16	60	72	132
16-18	147	104	251
Total	216	179	395

In Table 1.3, majority of respondents (N=251) reported to be within the 16-18 years age group, out of which was recorded more males (N=147) and fewer females (N=104). For the age category of 14-16 years, total number of respondents (N=132) comprised of males (N=60) which was less (N=12) than females (N=72) respondents. Only 12 respondents reported to belong the age group 12-14 years with two thirds of the number (N=12) being males (N=9) and one third being females (N=3). Older respondents were mainly males (N=147) within the age group 16-18 years (N=251) whilst the least respondents (N=3) were females within the 12-14 year age group.

<u>Table 1.4</u>

<u>A cross tabulation for Adolescents' Religion and Gender (N=395)</u>

	Male	%	Female	%	Total	%
Muslim	18	4.5	10	2.5	28	7.1
Christian	197	49.9	169	42.8	366	92.7
Tradition	1	0.3	0	0	1	0.3
	216	54.7	179	45.3	395	100.0

As shown in the distribution above, out of the total number of children 395 who were considered for the study, 28(7.1%) of them were Muslims with 18(4.7%) being males and 10(2.5%) being females, 366(92.7%) were Christians with 197(49.9%) males and 169(42.8%) females and 1(0.3%) male child was a traditionalist. The distribution is consistent with the statistics on religion available in Ghana. In Ghana, 69% of the population are Christians, 15.6% are Muslims 8.5% are Traditional believer and 6.9% constitute population from other religion apart of those mentioned above.

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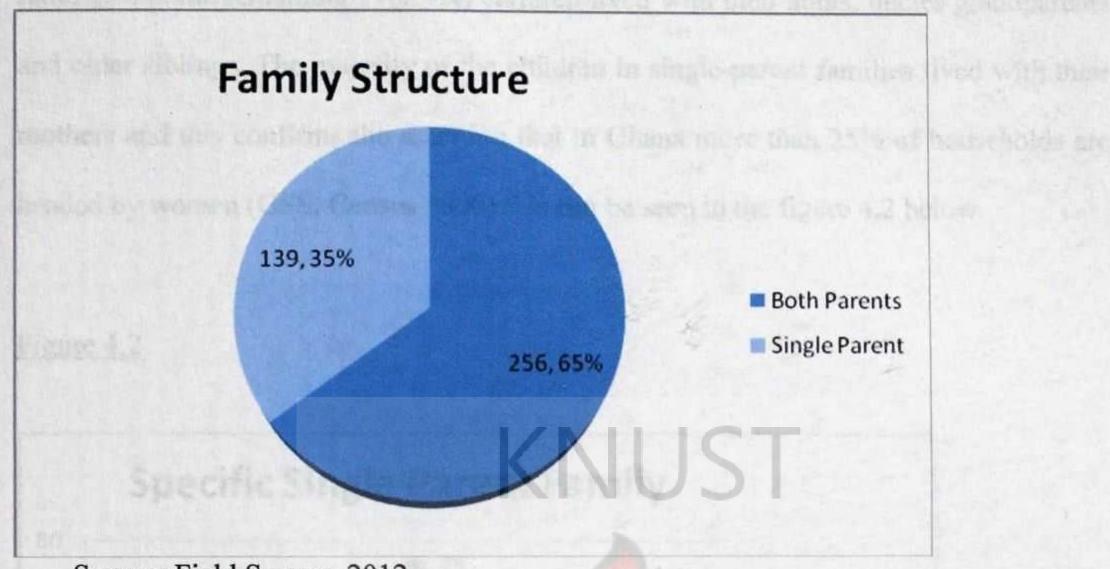
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structure the 139(%) entities were comment from a front terretation dust instead revealed

Figure 4.1



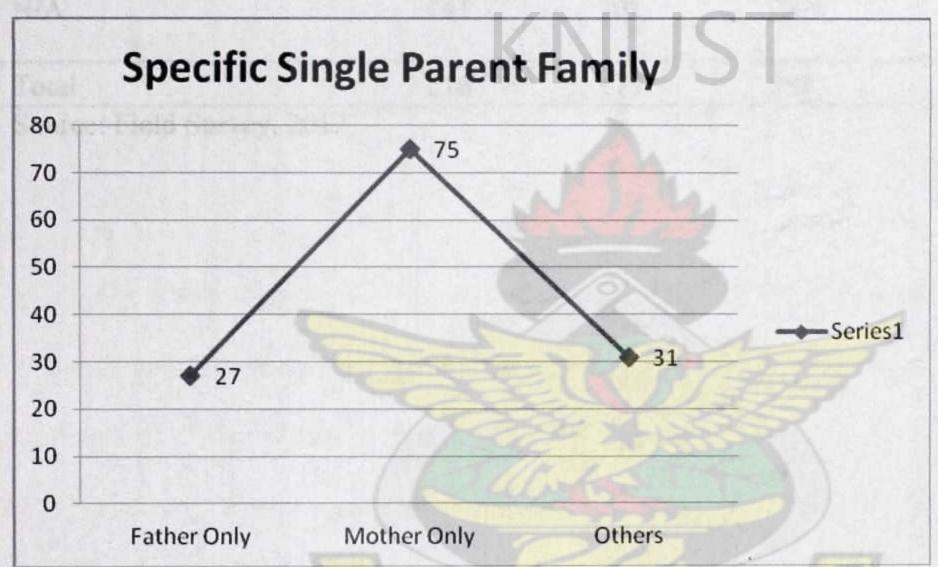
Family Structure (N=395)

Among the 395(100%) adolescents, who were considered for this study, 256(64.8%) as presented in figure 1.1 belonged to the two-parents family where they live with their two biological parents and 139(35%) lived with single parents. More than half of the sample lived with their two –biological parents. Of those coming from the two-parent families, 156(39.4%) of them were males and 100(25.3%) of them were females. Again, 9 (2.3%) were found to be in between ages 12-14, 85(21.5%) between 14-16 and 165(41.8%) between ages 16-18 forming the total of 256 children. Of the 139(35.2%) coming from single-parent families, 60(15.2%) of them were males and 79(20%) were females. 3(0.7%) of these children fell within the age category of 12-14, 47(11.9%) within 14-16 and finally 89(22.5%) from the category of 16-18.

When the data was further disaggregated to ascertain the specific single-parent family structure the 139(%) children were coming from, a cross tabulation distribution revealed

that 27(6.8%) of them were from father only families, 75(19%) from mother only families and the remaining 31(7.9%) children lived with their aunts, uncles grandparents and older siblings. The majority of the children in single-parent families lived with their mothers and this confirms the assertion that in Ghana more than 25% of households are headed by women (GSS, Census 2000) this can be seen in the figure 4.2 below

Figure 4.2



Source: Field Survey, 2012

Distribution of Specific Single-Parent Families

Of the 27(6.8%) children coming from father only families, 13(3.2%) were males and 14(3.5%) were. Out of the 75(19%) from mother only families, 28(7%) of them were males and 47(11.9%) were females. 14(3.6%) males and 17(4.3%), females made up the 31(7.9%) children who came from single- parent families other than lone- father and lone- mother single family structure.

Table 1.5

Gender intercept of Single parent families (N=395)

Family Structure	Male	Female	Total
father only	13	14	27
mother only	28	47	75
aunt, uncle, grandparents etc.	14	17	31
N/A	161	101	262
Total	216	179	395

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Family Characteristics

Table 1.6

Frequency distribution of Adolescents Family Size

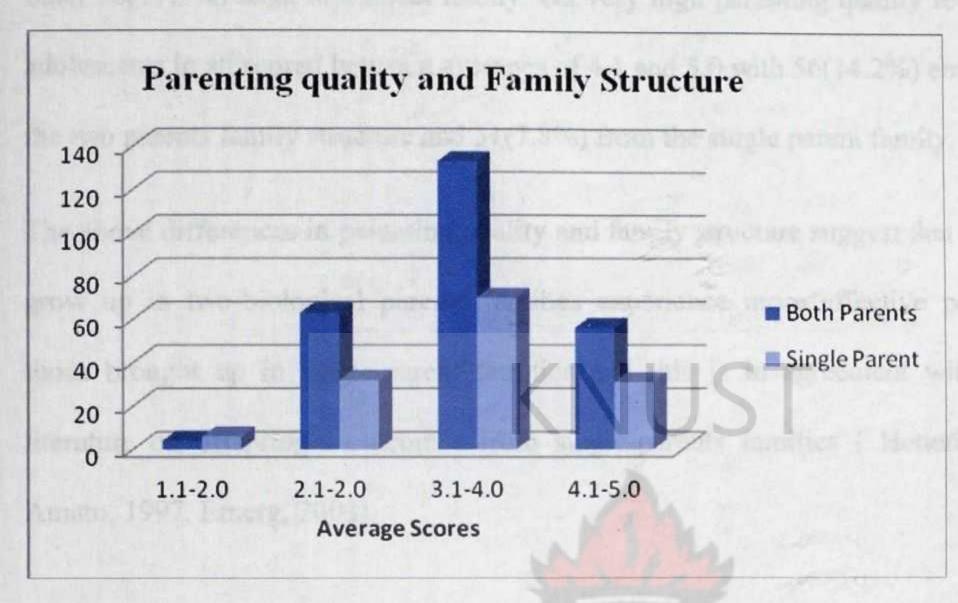
Family size	Frequency	Percent
2	4	1.0
3	32	8.1
4	58	14.7
5	99	25.1
6	132	33.4
6 and above	70	17.7
Total	395	100.0

Source: Field Survey, 2012

In Table 1.6 above shows the distribution of family size of the respondents. 4(1.0%) out of the 395 children who were interviewed belonged to a family size of two (2), 32(8.1%) belonged to a family size of three (3), 58(14.7%) came from a family size of four (4), 99(25.1%) also from a family size of five (5). 132(33.4%) from a family size of six (6) and the rest indicated that 70(17.7%) respondents were from a family size of with membership is more than six. From the data it could be realized that majority of the adolescents 132 (33.4%) came from large family size with membership to be six (6).

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Figure 4.3:



Parenting quality and Family Structure (N=395)

From figure 1.3 above, parenting quality measured the quality of time spent by parents with their children as well as their involvement in their wards activities. Parenting quality had a mean of 3.5 and standard deviation of 0.69 with 1.4 and 5.0 as its minimum and maximum values. On the average, 10(2.5%) of the 395 adolescents had scores of parenting quality between 1.1 and 2.0. These scores reflected the very low parenting quality they enjoyed from their parents, of this number 4(1%) were from the two parents families and 6(1.5%) of them from the single parent family. 95(24.1%) of them had average scores between 2.1 and 3.0. This indicated the low levels of parenting quality they experience from their parents. 63(16%) of them happen to come from the two parents family whereas the remaining 32(8.1%) from the single parent family.

203(51.4%) on the hand enjoyed high levels of parenting quality scoring averages between 3.1 and 4.0. 133(33.7%) of respondents were from the intact family and the other 70(17.7%) from non-intact family. On very high parenting quality levels 87(22%) adolescents in all scored between averages of 4.1 and 5.0 with 56(14.2%) emanating from the two parents family structure and 31(7.8%) from the single parent family.

The above differences in parenting quality and family structure suggest that children who grow up in two-biological parents families experience more effective parenting than those brought up in single-parent families and this is in agreement with the family literature on offspring's outcomes from single-parents families (Hetterington, 1998; Amato, 1997, Emerg, 2003).

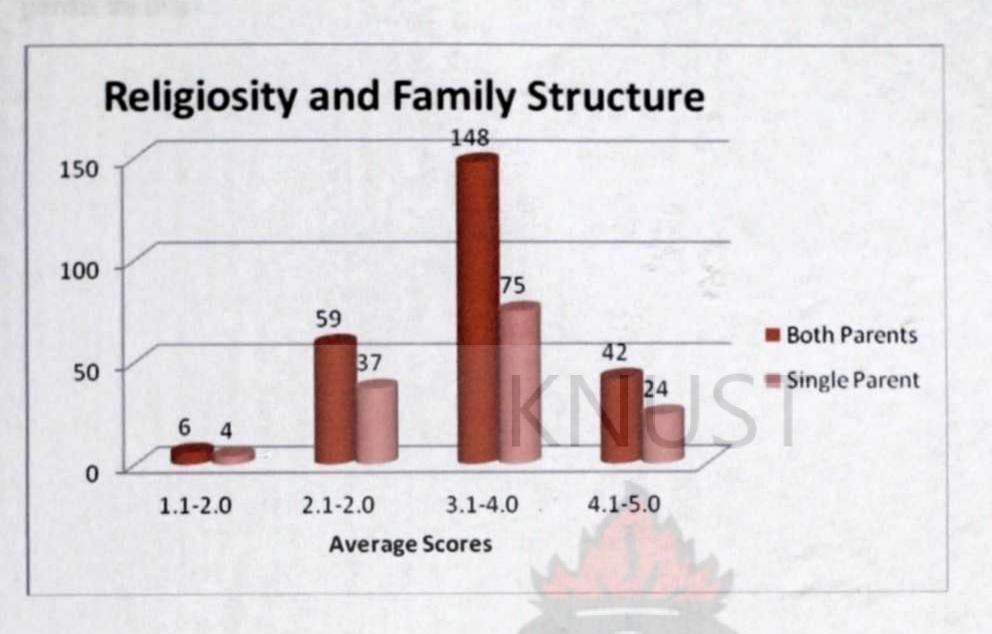
223(56,576) who responsible, [48(37,5%) of them were from the two pureou flundy

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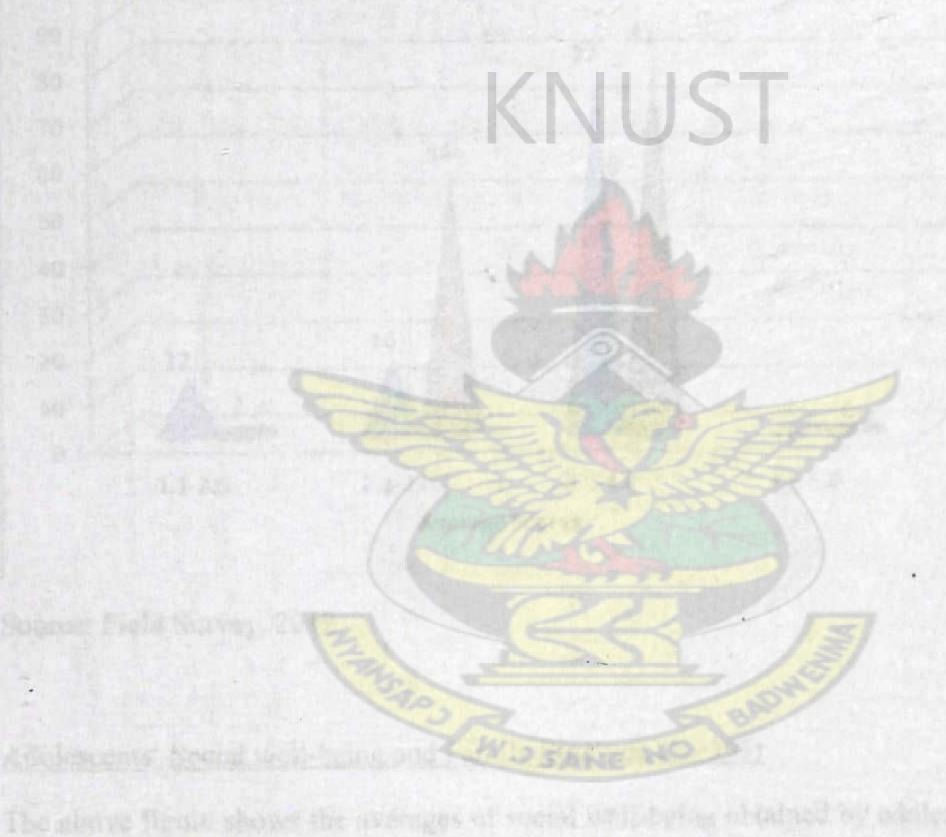
Figure 4.4:



Adolescent' Religiosity and Family Structure (N=395)

On the importance of religion to the on adolescents religiosity, 10(2.5%) out of the 395(100%) responded that their participation and involvement in religion was very low, 1.1-2.0. 6(1.5%) of those who obtained very low (1.1-2.0) religiosity average scores were from the nuclear family setting and 4(1.0%) from the single- parent families. 96(24.3%) of the adolescents scored marks between 2.1 and 3.0 having low involvement in religion activities. 59(14.9%) of these adolescents were from the intact family and 37(9.4%) from the single parent family. On high levels of religiosity (3.1-4.0) out of the 223(56.5%) who responded, 148(37.5%) of them were from the two parent family structure and 75(19%) also came from the single -families. 66(16.7%) of the adolescents

had averages between 4.1 and 5.0 thus scoring marks of very high religious involvement. 42(10.6%) came from two parents family and 24(6.1%) reported to have from single-parent families.



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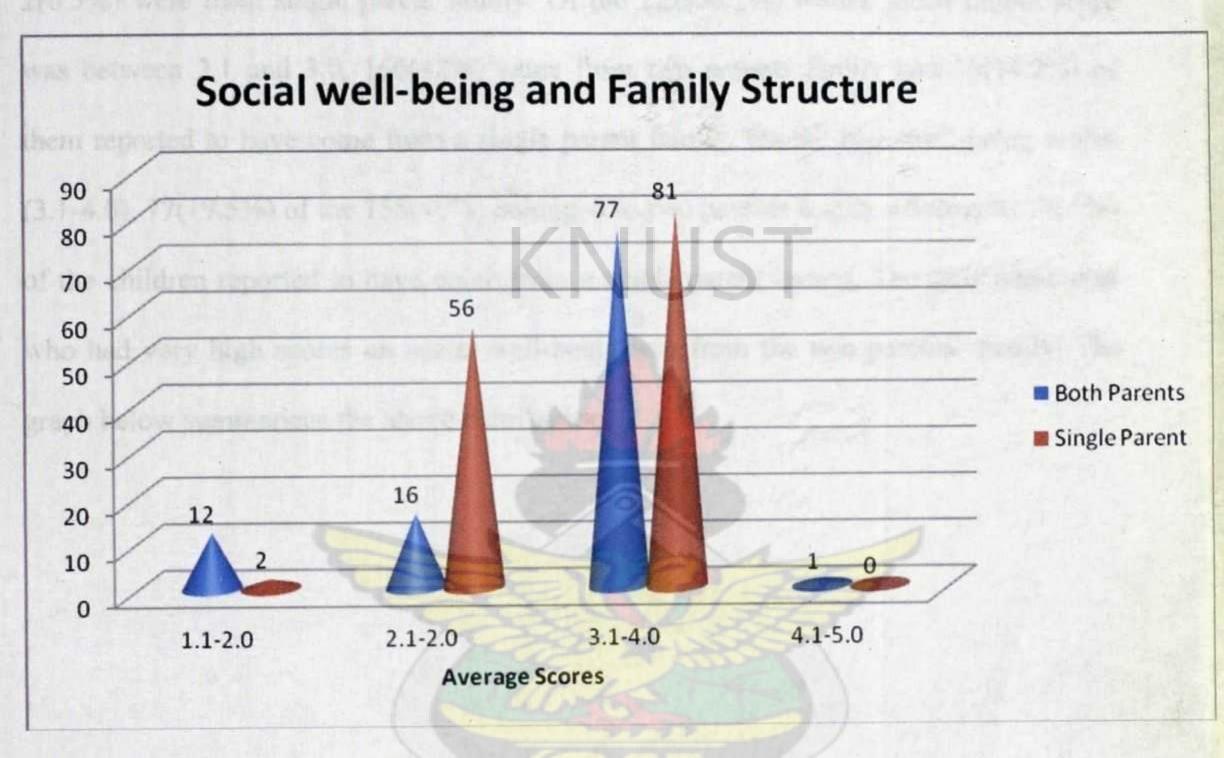
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Child well-being and Family Structure

Figure: 4.2



Source: Field Survey, 2012

Adolescents' Social well-being and Family Structure (N=395)

The above figure shows the averages of social well-being obtained by adolescents. It has for its mean 2.8 with standard deviation of 0.43, with a range of 1.28 and 4.28. It can be seen that on a scale of 1-5, out of the 395(100%) adolescents, 14(3.5%) of them had average scores between 1.2 and 2 which depicts very low levels of social well-being among these adolescents. 222(56.2%) had scores between 2.1 and 3.0 which implies low outcomes on the social well-being scale. 158(40%) respondents scored average marks

between 3.1 and 4.0 having high levels of well- being. Only 1(0.2%) adolescent had very high social well-being scoring marks between 4.1 and 5.0. When the data was disaggregated, it was revealed that 12(3.0%) out of the 14(3.5%) adolescents who fare very low on social well-being scale were from two parents family and the remaining 2(0.5%) were from single parent family. Of the 222(56.2%) whose social output score was between 2.1 and 3.0, 166(42%) came from two parents family and 56(14.2%) of them reported to have come from a single parent family. On the high well-being scores (3.1-4.0), 77(19.5%) of the 158(40%) belonged to two parents family whereas 81(20.5%) of the children reported to have come from a single parent homes. The only adolescent who had very high scores on social well-being was from the two parents' family. The graph below summarizes the above distribution.

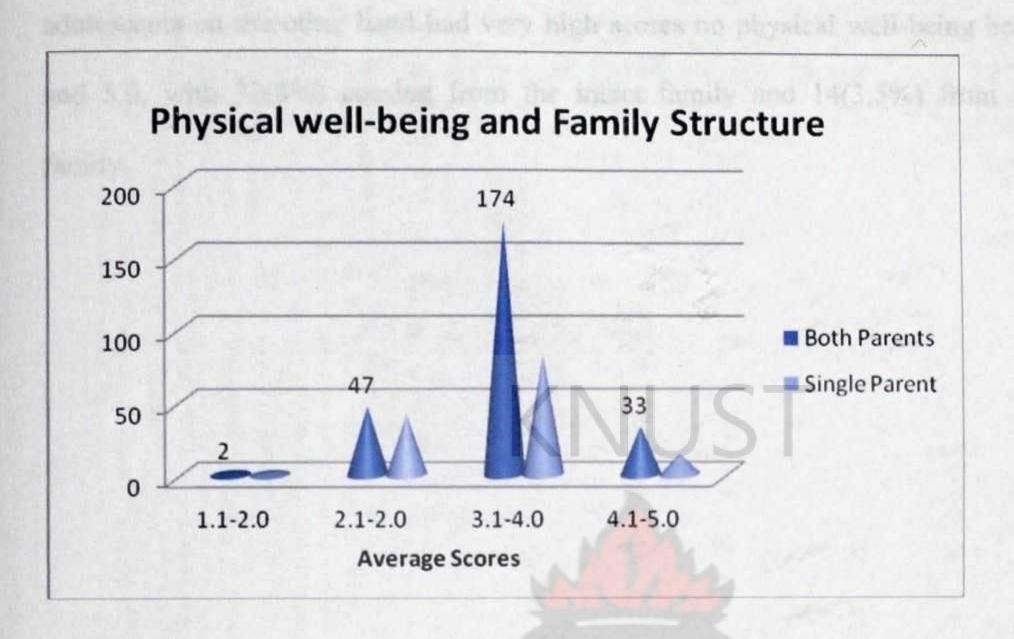
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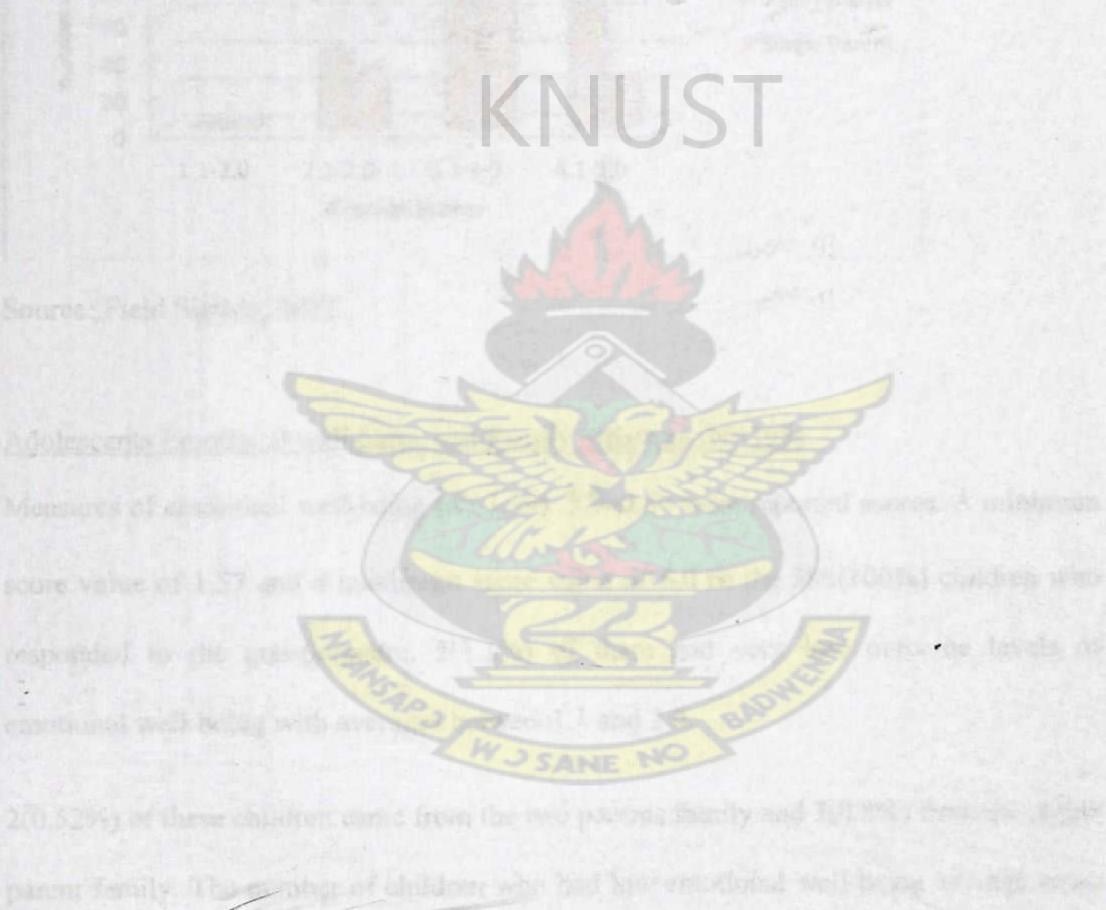
the selectories what y ore high on physical well-below scale were from

Source: Field Survey, 2012

Adolescents' Physical well-being and Family Structure (N=395)

The physical well-being indictor had a mean of 3.8 with standard deviation 0.53. It also had 1.57 and 5.85 as its minimum and maximum values respectively. On a scale of 1-5, averagely, 4(1.0%) out of the 395(100%) adolescents had scores between 1.1 and 2.0 indication of very low outcome on the physical well-being scale. 2(0.5%) of these 4(%) adolescents were from the two parents family and the other 2(0.5%) also coming from the single parent family. 89(22.5%) of these adolescents fare low on physical well-being scale scoring average marks between 2.1 and 3.0. 49(12.4%) of them were from the two family structured home. The remaining 40(10.1%) from the single parent family. 256(64.8%) reported high levels of physical well-being having scores between 3.1 and

4.0. 174(44%) of the adolescents who were high on physical well-being scale were from the intact family and 82(20.8%) also from the non-intact family. 46(11.6%) of these adolescents on the other hand had very high scores on physical well-being between 4.1 and 5.0, with 32(8%) coming from the intact family and 14(3.5%) from non-intact family.



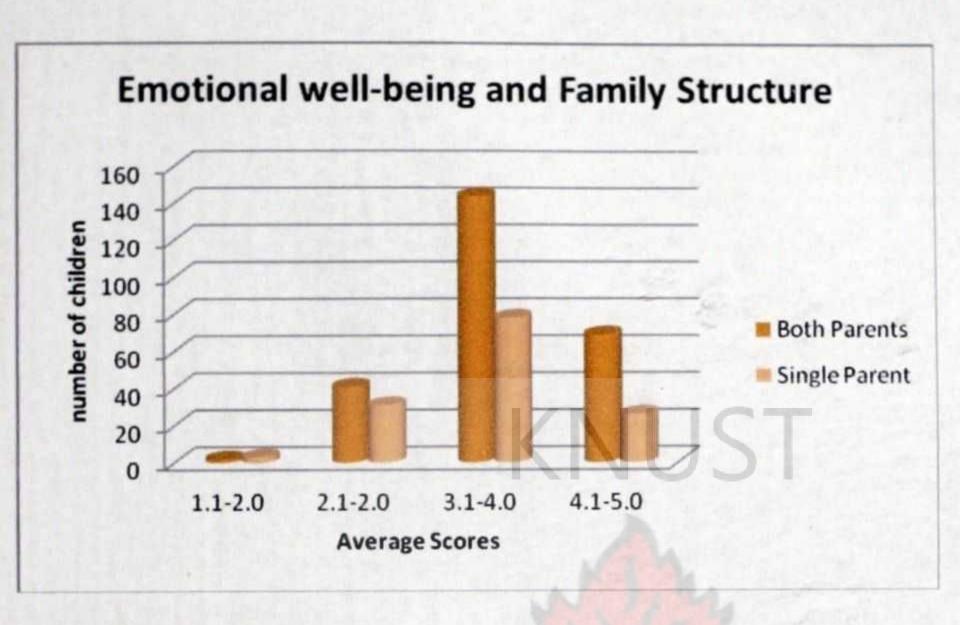
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Figure 2.3:



Adolescents Emotional well-being and Family Structure (N=395)

Measures of emotional well-being ($\bar{X}=3.59$) $\bar{S}\bar{D}=0.60$ were reported scores. A minimum score value of 1.57 and a maximum score value of 5.0 of the 395(100%) children who responded to the questionnaire, 5(1.3%) of them had very low outcome levels of emotional well-being with averages between 1.1 and 2.0.

2(0.52%) of these children came from the two parents family and 3(0.8%) from the single parent family. The number of children who had low emotional well-being average score (2.1-3.0) were 72(18.2%) in all. 41(10.4%) belonging to the two-parent family and 31(7.8%) to the single parent family. 222(56.2%) had high scores between 3.1 and 4.0, with 144(36.4%) reported staying with their two parents and 78(19.7%) reported staying with one biological parents. 95(24%) on the other hand had very high average scores

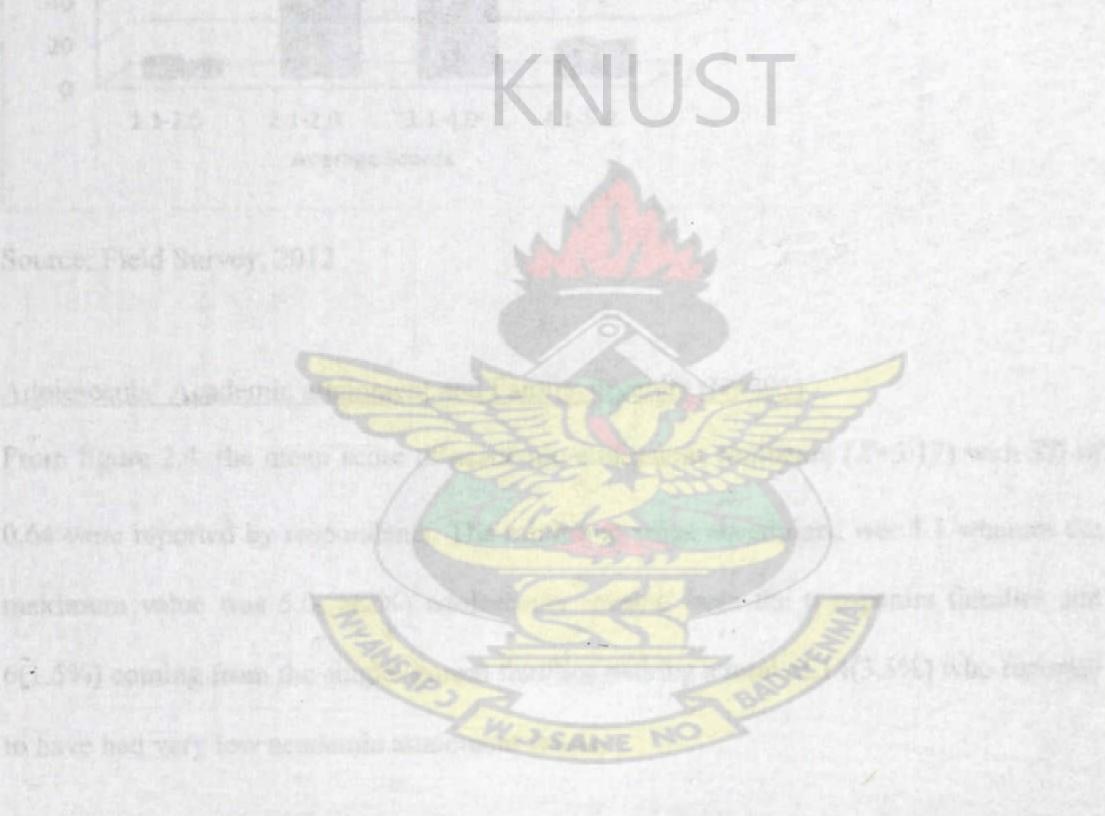
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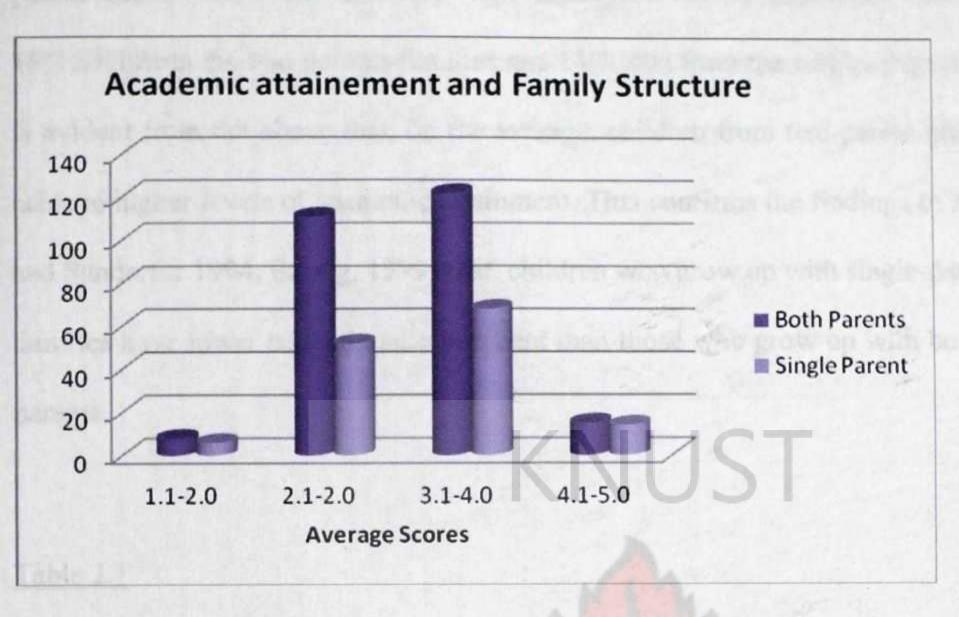
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between 4.1 and 5.0. 69(17.4%) of this number originated from both parents family structure and the remaining 26(6.6%) also originating from the single family structure.



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Figure 4.4:



Adolescents' Academic attainment and Family structure (N=395)

From figure 2.4, the mean score of academic attainment wellbeing (\bar{X} =3.17) with \bar{SD} of 0.64 were reported by respondents. The minimum value ascertained was 1.1 whereas the maximum value was 5.0. 8(2%) adolescents coming from the two-parent families and 6(1.5%) coming from the single- parent families making a total of 14(3.5%) who reported to have had very low academic attainment levels.

162(41%) out of the 395(100%) adolescents fare low on the scale of academic attainment with averages between 2.1 and 3.0.111(28.1%) out of the 162(41%) were from the intact family and 68(17.2%) from the non-intact family. 190(48.1%) of the adolescents had high scores on academic attainment levels that is, between 3.1 and 4.0. 122(30.8%) of those who score high marks on academic attainment were reported to have come from the

two-parents family structure and 68(17.2%) were reported to have come from the single parent family. 29(7.3%) had very high scores 4.1-5.0 on emotional well-being scale 15(3.8%) from the two parents families and 14(3.5%) from the single- parent families. (It is evident from the above that, on the average, children from two-parent parent families achieve higher levels of academic attainment. This confirms the findings of MacLanahan and Sanderfur 1994, Emerg, 1999) that, children who grow up with single-parent and step families have lower educational attainment than those who grow up with both biological parents.

Table 2.1

Family Structure and overall wellbeing (N=395)

Scores	Both Parents	Single Parent	Total
1.1-2.0	0	0	0
2.1-2.0	50	37	87
3.1-4.0	205	101	306
4.1-5.0	1 landan	1	2
Total	256	139	395

Source: Field Survey, 2012

The overall well-being average scores take into accounts the grand averages of social, emotional, emotional and academic attainment levels of well-being. The overall well-being ($\bar{X} = 3.26$, $\bar{SD} = 0.64$) recorded a range of 2.24 and 4.4 Taken into consideration the mean of mean of all the well-being scores, none of the adolescents had scores between 1.1 and 2.0. This means that none of the adolescents scored a mark very low on the overall well-being scale. 87(22%) of them reported between 2.1 and 2.0 scores depicting

low levels of overall well-being. Out of this 50(12.6%) of adolescents were from the two parents family structure and 37(9.3%) were from the single parent family structure. 306(77.5%) obtained high scores on overall well-being, with 205(51.9%) of the children from two parents family and 101(25.6%) from the single parent family. 2(0.5%) of the children reported very high values on the overall well-being scale (4.1-5.0).

1 (.25%) from the single family structure and the other 1(.25%) from the two parents family structure.

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Conclusion

From the above discussion it can be realized that adolescents from two-parent family structure fare well on all measures of well-being than their counterparts in the lone-parent family structure.

The finding of this study agrees with several findings from exact literature (Hetterington 1999, Amato 1997, Wallestein 1997)

Adolescents growing up in with two continuously married parents are less likely to experience a wide range of cognitive, emotional and social problems not only during childhood but also adulthood. (Amato, 2005)

Amato shows that compared with other children, adolescents who growing up in stable, two-parent families have higher standard of living, receive more effective parenting, experience more cooperative co-parenting, are emotionally closer to both parents and subjected to fewer stressful events and circumstances.

Multivariate Results

This aspect of the results captures the quantitative analysis of the effect of the family structure on adolescents' well-being mediated by family and adolescents characteristics.

The multivariate analysis used a stepwise regression approach to capture the effects of the each independent variable on the dependent variable.

Table 2.2 explains a stepwise regression analysis where family structure, family characteristics (mediating variables) and adolescents' characteristics regressed on overall adolescents' well-being. The table reports that 5% variance (R²=.005) in adolescents' well-being was explained by the model containing family structure, 58% variance (R².58) explained by the model containing the mediating variables and the third model containing adolescents' characteristics explained 60% variance (R².60) of adolescents' well-being. Family structure alone explained 5% variability (R²change = .005) the mediating variable accounted for 57% (R² change = .57) and adolescents' characteristics 2.5% (R² change .025) variability.

Table: 2.2 Model Summary of Outcomes of family structure and adolescents' well-being

Model	R	R ²	Adjusted R ²	Std. Error of Estimate	Change in R ²
1	.068	.005	.002	.30411	.005
2	.763	.582	.577	.19792	.0572
3	.779	.607	.600	.19248	.025

- a. Predictors: (Constant), Family structure
- b. Predictors: (Constant), Family structure, Religiosity, Family size, Parenting quality.
- c. Predictors: (Constant), Family structure, Religiosity, Family size, Parenting quality, Age, Gender.

d. Dependent Variable: Adolescents' wellbeing.

Table: 2.3

ANOVA Outcomes of family structure and adolescents' well-being

Mod	el	Sum of Squares	df	Mean Square	F	Sig.
1	Regression	.170	1	.170	1.837	.176ª
	Residual	36.346	394	.092		
	Total	36.516	395			
2	Regression	21.239	4	5.310	135.544	.000 ^b
	Residual	15.277	391	.039		
	Total	36.516	395			
3	Regression	22.179	7	3.168	85.525	.000°
	Residual	14.337	388	.037		
	Total	36.516	395			

In model 1, adolescents' well-being was regressed on dummy variables representing the two types of family structure categories namely single and two-parent families. As shown in the summary model output for model 1 above, family structure net family characteristics (mediating variables) thus, parenting quality, family size, religiosity as well as adolescents' characteristics does not well explain adolescents' outcomes. From the model summary, only 5% of adolescents' well-being is explained by family structure and this does not reach statistical significance. Although the ANOVA table predict a relationship between family structure and adolescents' well-being this relationship is not very much significant (F = 1.837, p < .176). From the coefficients output this relationship predicted by the model seem to be a negative one (b = -.068, t = -1.35, p < .176).

Table 2.4

Coefficients output of family structure and adolescents outcomes

Model (Constant)		Unstandardized Coefficients		Standardize d Coefficients	t	Sig.
		В	Std. Error	Beta		
1	(Constant)	3.352	.019		176.360	.000
	Family structure	043	.032	068	-1.355	.176
2	(Constant)	1.916	.073		26.397	.000
	Family structure	031	.021	049	-1.483	.139
	Parenting quality	.212	.015	.484	13.872	.000
	Religiosity	.209	.016	.443	12.734	.000
	Family size	007	.007	033	-1.003	.316
3	(Constant)	1.887	.085		22.100	.000
	Family structure	015	.021	023	722	.470
	Parenting quality	.219	.015	.501	14.462	.000
	Religiosity	.210	.016	.446	13.126	.000
	Family size	010	.007	050	-1.504	.133
	Ethnicity	.003	.006	.015	.471	.638
	Gender	096	.020	158	-4.850	.000
	Age	.018	.019	.032	.971	.332

The second model adds family characteristics- parenting quality, family size and religiosity. In model 2, the inclusion of these mediating variables tends to increase the relationship between family structure and adolescents' well-being to a significant level. (F = 135.5, p<.000). The strong predictive association indicates that family structure operates through these mediating factors. [(Parenting quality: b = .48, t = 13.8, p<.000), (Religiosity: b = .44, t = 12.7), (Family size: b = .033, t = -1.003, p<.316)].

In the third model, the researcher adjusted for adolescents' characteristics such as gender, age and ethnicity. When adjusting for these variables the model again tend to be more

predictive. There is an increase in R from .763 to .779. The R^2 also increases from .58 to .60 [(Ethnicity: b = .15, t = .47, p < .638), (Gender: b = -158, t = -4.85, p < .000) (Age: b = .032, t = .971, p < .335)].

The constant variable(s) appears to be very significant in all the three models estimated.

From the three estimated multiple regression models above, the second model containing the family mediating variables is chosen as the principal model of this study this is because it captures the independent variables of the study.

The Regression Equation involving the three models

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$$Y = 1.887 - .015X_1 + .219X_2 + .210X_3 - .010X_4 + .003X_5 - .096X_6 + .018_7 + \epsilon$$

Table: 2.5

Illustration the inter correlation matrix for the study variables (Mediating Factors)

	Y	X1	X2	X3
Y	1.00000000		LIST FOR SER	these producted
X1	0.60471264	1.00000000		
X2	-0.06270428	0.02160605	1.00000000	mind of them
X3	0.63638615	0.33342509	-0.08570380	1.00000000

Y= Overall Adolescents' Wellbeing, X1= Parenting quality, X2= Family size, X3= Religiosity

The correlation matrix above shows the correlation coefficient (Pearson's r) for each of the explanatory variable with every other variable including the response variable – adolescents' well-being. This is also supported by the variance inflation factor (VIF) in the coefficient table 2.8 under collinearity statistics. In appendix C, figure 1.1 predicts

pictorial or visual linear relationships between the response and the explanatory variables.

It is upon this premise that multivariate regression estimations are set.

The patterns of the scatter plots (Appendix, C) show that the relationship between parenting quality, religiosity and adolescents' well-being are approximately linear, while the relationship between family size and adolescents' well-being cannot clearly be determined.

Table 2.6:

Model Summary of parenting quality, religiosity, family size and well-being

Model	R	R Square	Adjusted R Square	Std. Estima	Error	of
i i	.761 ^a	.579	.576	.19823	3	

a. Predictors: (Constant), Parenting quality, Religiosity, Family size

From the summary model, the multiple regression coefficient (R) = .761(76.1%) indicates that there is a strong positive relationship between the observed and those predicted by the model. The value of the R^2 which gives the proportion of variability of response variables is .57(57.6%). This implies that 57% of the dependent variable (Adolescents' well-being) is explained by the independent variables namely: parenting quality, religiosity and family size. 43 % is due to something else.

Table 2.7

ANOVA output for parenting quality, religiosity, family size and well-being

Mod	lel	Sum of Squares	df	Mean Square	F	Sig.
1	Regression	21.152	3	7.051	179.441	.000ª
	Residual	15.364	391	.039		
	Total	36.516	394			

- a. Predictors: (Constant), Parenting quality, Religiosity, Family size.
- b. Dependent Variable: Adolescents' wellbeing.

ANOVA results (Table 2.7) is indicative of predictive strength (F= 179.4, p<.000) of the model suggesting its appropriateness for explaining variance in adolescents' well-being. The table makes claim by the value of F, that the independent variables are associated with the dependent variable.

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Table: 2.8

Coefficients output for parenting quality, religiosity, family size and well-being

Model		Unstanda		Standardize d Coefficient s	t	Sig.	Collinearity Statistics	
		В	B Std. Error				Toleranc e	VIF
1	(Constant)	1.900	.072	170 11 11 11	26.426	.000		
meti	Religiosity	.209	.016	.443	12.724	.000	.886	1.128
No.	Parenting	.213	.015	.486	13.898	.000	.880	1.136
A.SIII, S.U.	Family size	006	.007	031	929	.353	.990	1.010

a. Dependent: Adolescents'

well-being

Table 2.8 demonstrates the beta coefficients which indicate how and to what extent the mediating variables (family characteristics) such as religiosity, parenting quality and family size had an impact on overall adolescents' well-being. As shown, parenting quality (beta=.48, t=13.8, p<0.000) had the highest significant positive impact, followed by religiosity (beta=.44, t=12.7, p<0.000), family size on the hand shows a negative association with adolescents' well-being but does not reach statistical significance (beta=.-031, t='-.92, p<0.353). In the coefficient output, we find for each of the independent variable the predicted change in the dependent variable when the explanatory variable is increased by one unit conditional on all the other variables in the model remaining constant. The standardized coefficients values for both parenting quality (.48) and religiosity (.44) estimate that adolescents' well-being is increased by 48% and 44% for every additional score on parenting quality and religiosity respectively. Parenting quality and religiosity are highly significant and positively associated with

adolescents' wellbeing. From the ANOVA and the coefficient output the researcher tested the first hypothesis of the study. That is, religiosity is positively related to adolescents' well-being, the hypothesis of no relationship is therefore rejected.

Test of Assumptions for multivariate Analysis

The regression analysis seeks to check or inspect the assumptions stated early in the methodology of the previous chapter. It is to check whether the residuals (error term) have a constant variance, whether the errors are independent and the residual or error term is normally distributed. From figure 1.2 and 1.3 (Appendix C), it can be seen that the residuals: 265, 155, 99, and 67 are independent and normally distributed. The normal distribution curve reports mean of -6.71, standard deviation of 0.996

Figure 1.1 (Appendix C) shows the scatter plots of the residuals against individual predictors. The residuals should lie around zero with the degree of scatter not varying systematically with the size of predicted values. (Cook and Weisberg,1982). The residuals assumed to be uncorrelated with individual predictors thus are independent. It appears that the homogeneity of variance assumption is not violated since the residuals scatter randomly (residuals seem to be randomly distributed) around the zero line and the degree of scatter appears constant across the range of predicted values. Violation of this would have been indicated by some noticeable pattern of dependence in the scatter plots. The normal probability plots looks near to normal, the assumptions seems reasonable in this case. The histogram of the residuals is also consistent with the assumption of normality.

All plots show approximately linear relationships. It can therefore be concluded that the relationship between parenting quality and religiosity and adolescents' well-being has been modeled reasonably well by the multiple regression equation.

The Regression Equation involving the study variables (Mediating Factors)

 $Y = 1.900 + .209X_1 + .213X_2 - .006X_3 + \varepsilon$

Table 2.9

Model Summary of parenting quality and academic attainment

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.317ª	.100	.098	.61051

a. Predictors: (Constant), Parenting quality

assessments and those prestured t

b. Dependent Variable: Academic attainment

Table 2.10

ANOVA for parenting and academic attainment

Mod	lel and F = 0. F	Sum of Squares	df	Mean Square	F	Sig.
1	Regression	16.334	1	16.334	43.823	.000ª
	Residual	146.479	393	.373	SEE & BEST INC	13 14 151
	Total	162.813	395			1

a. Predictors: (Constant), Parenting b. Dependent Variable: Academic

Table 2.11

Coefficients output of parenting quality and academic attainment well-being

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B Std. Error		Beta		
1	(Constant)	2.146	.158		13.550	.000
in the con	Parenting	.293	.044	.317	6.620	.000

a. Dependent Variable: Academic

The resulting regression output in tables 2.5 and 2.6 tend to depict the relationship between parenting quality and academic attainment well-being. The model fit output consists of a "Model Summary" table and an "ANOVA" table. The former includes the multiple correlation coefficients, R, its square, R², and an adjusted version of this coefficient as summary measures of model fit. The multiple correlation coefficient R = 0.31 indicates that there is some sort of correlation between the observed academic attainment and those predicted by the regression model. The model again depicts by the R² that, 10% of the variability in academic attainment is explained by parenting quality. The ANOVA table provides an F-test for null hypotheses that there is no relationship between dependent (academic attainment) and independent (parenting quality) which implies that F = 0. From the table F = 43, this shows that parenting quality and academic attainment are associated. As a way of testing the second hypothesis of this study, the researcher will to fail accept the null hypothesis and establish that there is a relationship between the two variables and the relationship is very significant as shown by the coefficient table (b = 31, t = 6.6, p<.000).

Analysis of Data to Test Hypothesis

This section reports the use of regression coefficients in the model summary, ANOVA table and the coefficients output to test the research hypotheses to determine relationships between predictor variables and measures of adolescent's well-being outcomes.

Hypothesis 1:

Adolescents in single-parent families and two-parent families are significantly different on well-being outcomes. The results of the analysis from table 2.4 indicates that coming from a single-parent family structure has a negative association with adolescents well-being (t= -1.35), but that difference is not significant (p<.176). The outcome of this result does not support the hypothesis, the researcher therefore reject H_0 and accept H_1 .

Hypothesis 2:

There a significant relationship between religiosity and adolescents' well-being. The results from the coefficients output tables 2.4 and 2.8 show a positive relationship between religiosity well-being outcomes (t=12.73), and this as relationship is proven to be highly significant by its p-value (p<.000). The hypothesis is therefore supported on this ground and H_0 is accepted and H_1 rejected thus the researcher is 99% sure that this assertion is true.

Hypothesis 3:

There is a significant association between parenting quality and adolescents academic attainment outcomes. The results provided in table 2.11 suggests a positive association between parenting quality and academic attainment outcomes of adolescents (t=6.6), here again, this result predict a significant association between the two variables (p<.000). Conclusion can therefore be made that H_0 is true (99%) and H_1 is not true.

Hypothesis 4:

Burilles are significantly

There is a significant difference between family size and adolescents' well-being. The analysis from table 2.4 and 2.8 indicates that family size has an inverse relationship or association with adolescents' well-being outcomes (t= -.1.00) but that relationship is not significant (p<.316). This result does not support the hypothesis state prior to the study. H₀ is therefore rejected and H₁ accepted.

KNUST

Hypothesis 5:

There is a different between adolescent males and adolescent females on well-being outcomes. Adding on adolescents characteristics to serve as control variables in the model, the analysis suggest that gender has a negative significant difference in well-being outcomes (t= -4.85, p<.000), thus males adolescents seem to have unfavorable well-being outcome than female adolescents do. This result supports the claim that males and females are different on well-being measures.

Summary Table of Result of Analyses of Statistical Significance of Study Hypothesis

THE E A CURTAINANT BOLVERS	Statistical Test Performed	Results of Test Performed
Hypotheses	t-test	ANOVA Results
Adolescents in single-parent	t= -1.35	Non. Sig
families and two-parent families are significantly	p<.176	
different on well-being outcomes.	KNUST	
There a significant relationship between religiosity and adolescents'	t=12.24 p<.000	Sig.
well-being.		Thy are significant in
There is a significant association between parenting quality and adolescents academic	t=6.62 p<.000	Sig.
There is a significant		Non. Sig.
difference between family size and adolescents' well-		

CHAPTER FIVE	
t= -4.85	Sig.
p<.000	
he entire work. It seeks to	give a summary of the major
short on the effect of the fit	or its structure on adolesessors.
	t= -4.85 p<.000

Note: Significant levels *** p<0.01 (99%), ** p<0.05 (95%), * p<0.1 (90%)

Source: Field Survey, 2012

autofestrates common to all the model to any type.

Conclusion

This chapter of the study focused on the outcome of the effect of the family structure and adolescents' well-being. From the estimated regression models, it was realized that among the family mediating variables, parenting quality and religiosity are significant in explaining adolescents well-being. Among child's own characteristics, gender had a significant effect on child well-being. Parenting quality was also seen to have a significant relationship with child's academic attainment levels.

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CHAPTER FIVE

SUMMARY, DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

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Introduction

This is the final chapter of the entire work. It seeks to give a summary of the major findings of the study undertaken on the effect of the family structure on adolescents' well-being in the some selected schools in the Cape Coast Municipal district in the Central Region of Ghana. It includes the main conclusions drawn from the study and recommendations derived from the analysis of the available data. It also outlines suggestions for further research.

used for the study. The first model estinged the effect or family structure a single and

two-prings families on could well being one family mediators and adolescents

Summary State of the State of t

Differences in life outcomes to some extent are determined by the composition of the family. One fundamental characteristic of the family that has significant and sustaining effects of adolescents is its structure that is the number of parents and their relationships to the children in the household. The considerable importance the families to the adolescents cannot be underestimated in any way. Adolescents' well-being is contingent on the family structure or the living arrangement adolescents find themselves in. The purpose of the study was to examine the effects of the family structure on adolescents' well-being. The study sought to find out how family mediating factors (characteristics) such as parenting quality, religiosity and family size influence affects adolescents' well-being.

To sample the respondents for the study, the stratified, systematic and simple random technique of sampling were employed. The unit of analysis was school adolescents in the five (5) selected schools – Mfantispim, Ghana National College, Academy of Christ the King, Pitmas and CSI. The study considered adolescent's self report or perception about their well-being. In all, 395 sample sizes were drawn from all the schools. Self administered questionnaire was the principal instrument used for data collection. Data obtained included the demographic characteristics of the adolescents and aspect capturing their physical, social, emotional and academic attainment well-being levels.

The tool used for data analyses was a stepwise multiple regression. Three models were used for the study. The first model estimated the effect of family structure – single and two-parent families on child well-being net family mediators and adolescents characteristic. The model sought to find the independent interaction effect of only adolescents living arrangement. The outcome of this model suggested that family structure alone has a minimal effect on child well-being and that effect does not reach statistical significance.

The second model incorporated the family mediating variable: parenting quality, religiosity and family size. The inclusions of these variables brought about a significant effect in adolescents' well-being outcomes. Parenting quality and religiosity were seen to be very influential in adolescents' well-being.

The third model employed child's own characteristics age, gender, birth order and ethnicity; and among these variables, gender was seen to be very much related to well-being.

The empirically evidence is that, family structure (with mediating effects) have a tremendous effect on adolescents' well-being and that adolescents from single parent families on the average are significantly different from those from the two-parent families.

Discussion

The section of the chapter is a discussion of the results of the study. Its main highlights are on a review of research objectives and main findings.

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Review of Research Objectives

The goal of this study was to better understand the relationship between family structure and child well-being mediated by parenting quality, religiosity and family size by using cross-sectional survey to determine whether these mediators influence child well-being and whether this relationship varies by family structure. Overall, the results provide evidence that the mediating factors may have positive or negative consequences for adolescents' well-being (Wallestein 1999, Hetterington 2001, Amato 2000 & Oheneba Mainoo, 2008).

Family structure operates through many multiple mechanisms such as parenting quality, religiosity, and family size to influence adolescents' outcomes. The unique contributions of these variables to the prediction of adolescents outcomes was of major reason of the study to assess and also to ascertain what mediating variable are most significantly associated with adolescents' well-being outcomes. The results of the study are discussed below.

Parenting Quality and Adolescents' well-being Outcomes

Parenting quality is a significant family variable that has a high predictive ability on adolescents overall well-being. Consistent with previous research there is some evidence suggesting that parenting quality may be beneficial to adult children. (Ermisch & Francesconi 2001). Having a parent or guardian who is very much involved and well integrated into a child's activities go a long way to have positive influence on their children. The quality as well as the quantity of time allocated in child upbringing has proven to have a positive consequence for child cognitive and health outcomes (Antecol & Bedard, 2007, Francesconi & Ermisch 2001). The cross tabulation result of parenting quality and family structure in the descriptive analysis shows that on the average children who are from single parent families enjoy lower levels of parental involvement. Adolescents who have high relationship quality and closeness with their parent are able to communicate freely and openly about their feelings, problems, challenges among others fare well on measures of social well-being outcomes because of prenatal warmth and attention they receive.

When adolescents feel unconnected at home, with their family and even at schools, they get themselves involved in activities that put their health and general behaviour at risk. However, when parents affirm the values of their adolescents, they often develop positive, healthy attitude about themselves. Parent-child warmth and communication tend to promote health, achievement and self-esteem (Resnick MD et al, 2009 & Karofsky PS et al, 2007)

Confident, loving parent-child communication leads to improved well-being, improved communication about all facets of life and fewer risk behavior among adult children.

When parents and youth have good communication, along with appropriate firmness, studies have shown that youth report less depression and anxiety and more self-reliance and esteem (Steinburg L, 2001 & McNeely C et al, 2002).

Lack of or poor communication also affects behavior and attitudes. In studies, young people who reported feelings of lack of parental warmth, love and care were also more likely to repeat emotional distress, lower self-esteem school problems, drug use and sexual risk behaviors (Resnick MD et al, 2009 & Karofsky PS et al. 2007).

Parenting quality characterized by warmth enhances positive outcomes for children (McCrthy and Morote, 2009, Sammons et al 2008, Sims, Gilfoyle and Parry, 2008) it tends to promote adolescent's social, emotional, physical and academic attainment wellbeing outcomes.

Religiosity and adolescents' well-being Outcomes

Consistent with the extant literature religiosity is seen to be very much significant and positively associated with adolescents' well-being (p<.000). Religion influences parents, by extension, their children. (Mahoney et al. 2003; Petts, 2007). Adolescents benefit by being immersed within a larger moral community that reinforces the teachings provided by parents and further promotes healthy developmental behavior among them, (Bartkowski et al. 2008, Myers 1996; Smith and Denton 2007). Aspect of religious beliefs, affiliation, and practice also play a role in supporting, psychological, emotional and social well-being (Ellison 1991, 1995; St.George & McNamara 1984).

This evidence supports Emile Durkheim's theoretical claims that religion provides hope and happiness for its members (Alpert, 1939). Undoubtedly the structural features of religious institution for example, their social closure as well as faith, moral values, among others plays an important role in cultivating the seedbeds of parental virtue.

As shown in figure 1.4 in the descriptive analysis, adolescents who appeared to be very much participating and involving in their religion had high mean scores on levels well-being. Adolescents coming from single-parent families comparatively with their fellows from the two parents families on the average are not significantly differently in terms of religiosity, this pattern is not very much consist with most literature. This could be due to that fact that in Ghana almost every individual irrespective of the living arrangement belongs to one religious affiliation or the other that is to say that very home has got something to do with religion.

Family size and Adolescents' well-being Outcomes

The findings of the study also indicate that family size has no significant relationship on adolescents' well-being. (b= -031, t=-92, p<.353). This outcome is not in contrast to literature. Most studies revealed that family size has a significant and a negative influence on child well being. (Conley and Glaudber 2005). It has established like the researchers the negative coefficient indicted a negative impact effect of family structure and adolescents well being (Downey, 1995)

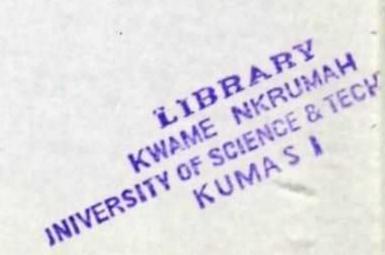
Conclusion

The following conclusions were drawn from the analysis and findings of the study. It was noticed first of all that overall adolescents' well-being is explained by some family and demographic characteristics; thus adolescents' well-being was explained by parenting quality, religiosity, and gender.

It was noticed in chapter four that parenting quality was a significant predictor of overall adolescents' well-being, this was explained by (48 or 48%, thus parenting quality is shown to be an important mechanism by which family structure affects child well-being. Parenting quality was also found to be a significant predictor of child's academic attainment levels.

Secondly, religiosity was also seen to be one of the most important variables, second to parenting quality according to the findings of this study (that mediate family structure and child well-being). This shows that religious importance to family life can never be down played.

Overall, this study highlights the importance of examining multiple category of family structure, of analyzing effects across more than one outcome domain, and evaluating a range of theoretical mechanism that may mediate between family structure and child well-being.



Recommendations

Based on the outcome of this study, the researcher has proposed a number of recommendations for policy makers, stakeholders, NGOs and other agencies interested in the affairs of families and youth.

The Ministry in charge of women and children affairs may design more effective programmes to strengthen family relationships to promote and to protect adolescents' wellbeing. Once family relationships are strengthened and solidified adolescents are most likely to grow in a loving, peaceful, and tension free environment and this will to promote and improve their well being.

Separation of families through migration (rural-urban, urban-rural and international migration) and most importantly divorce put children in much despair. It should be in the interest of government and NGOs to plan programs and implement policies that can help educate parents and raise their awareness of the impact of parental separation on adolescents. Emphasis of this education should be on share parenting practices which produce a good number of developmental outcomes in children. Programmes of this nature must come along with appropriate measures to evaluate and assess the effectiveness to determine the extent to which the programme is meeting its aims.

Parenting quality was found to be a very important element so far as child well-being is concern. There should therefore be the need for education through seminars, the media, among others by professional counselors to educate and guide parents and caregivers to acquire the skills needed for engaging in effective parenting. Parenting issues including

parent-child communication, parental involvement in their children among others, should be key area of concern.

The findings of the study suggest that religion plays a significant role in influencing adolescents' well-being. This means the importance of religion cannot be understated in any way so far as favorable outcomes in adolescents' are concern. Government and NGOs can therefore form strong collaborations with religious organizations so that they can mediate some of their programs through them.

Finally, it is recommended that school counseling that utilizes appropriate counseling techniques to help students who are faced with emotional social and academic attainment problems to receive the needed guidance and counseling that will put them in the right perceptive to pursue a holistic life.

Limitation of the study

Although there are a number of strengths in this study, there are also some limitations. One of the main shortfalls of the study was the mediating variable selected; the significant mediating variables were excluded in the study. This was realized by the constant term of the regression model (p<0.000). Inclusion of these significant variables could have also helped explained adolescents' well-being outcomes much better.

Again, the study is limited in terms of the settings of the survey or the study area. The schools chosen for the survey were all situated the Cape Coast Municipal District. A

comparative study of schools with two or three district could have made the study more interesting and increase generalizability.

Another limitation of the study is its quantitative oriented nature. Qualitative source of data could be of further value in future investigations. These would allow for more in depth interpretation and understanding of findings obtained with the types of structural quantitative measures used in this study and most previous research. (Oheneba Mainoo, 2008).

Future Research

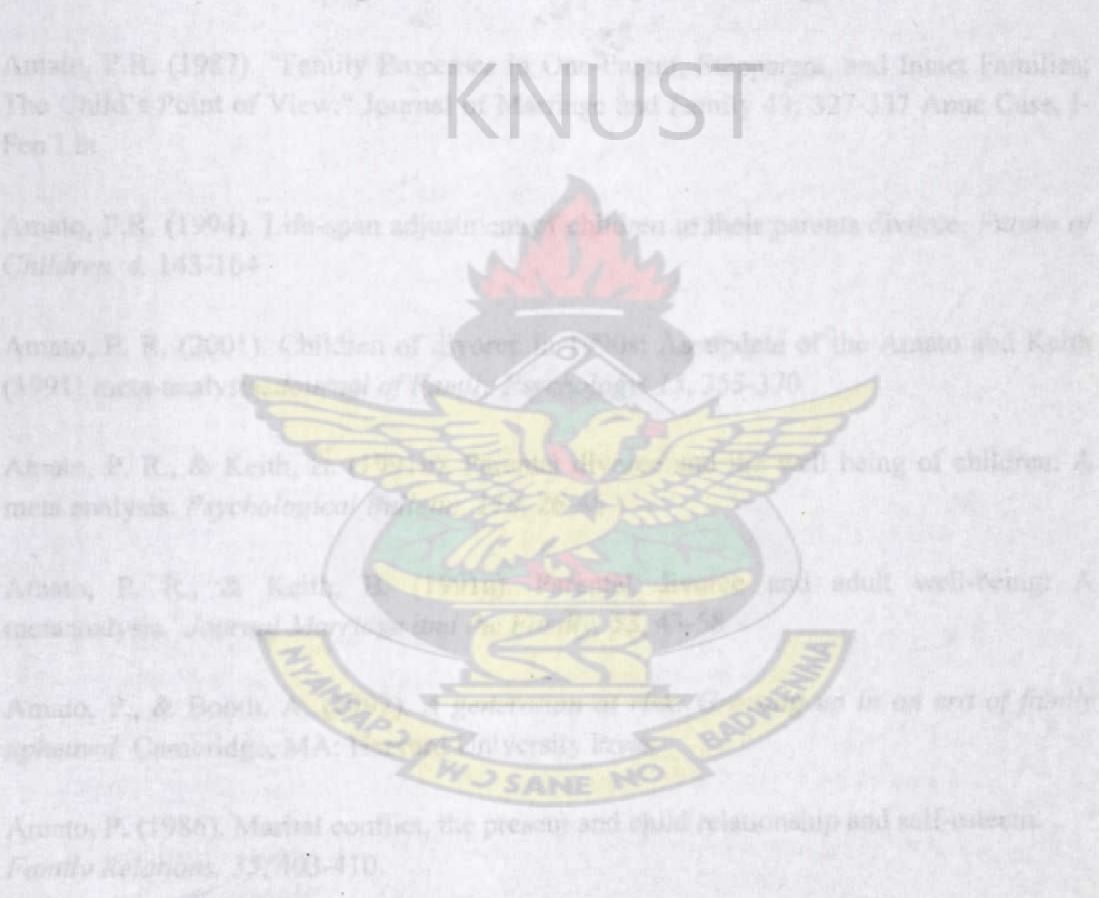
To address the outlined limitations, the study found areas for further research to expand more on the understanding and literature on the adolescents' well-being outcomes and family structure and its processes. Future research should include several other significant variables such as parental income status to better predict adolescents' outcomes.

In addition, different sites of the study could be selected from geographically diversified regions in order to increase the representativeness of the sample and to increase generalizability of the research findings.

Future study of this nature should incorporate qualitative design that could allow for a more in-depth interpretation and understanding of this phenomenon. Since deductive

qualitative analysis may be useful for the testing and reformulation of theoretical models that underpin adolescents' well-being (Gilgun, 2001, Oheneba, Mainoo, 2008).

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Appendix A

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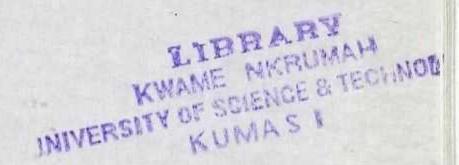
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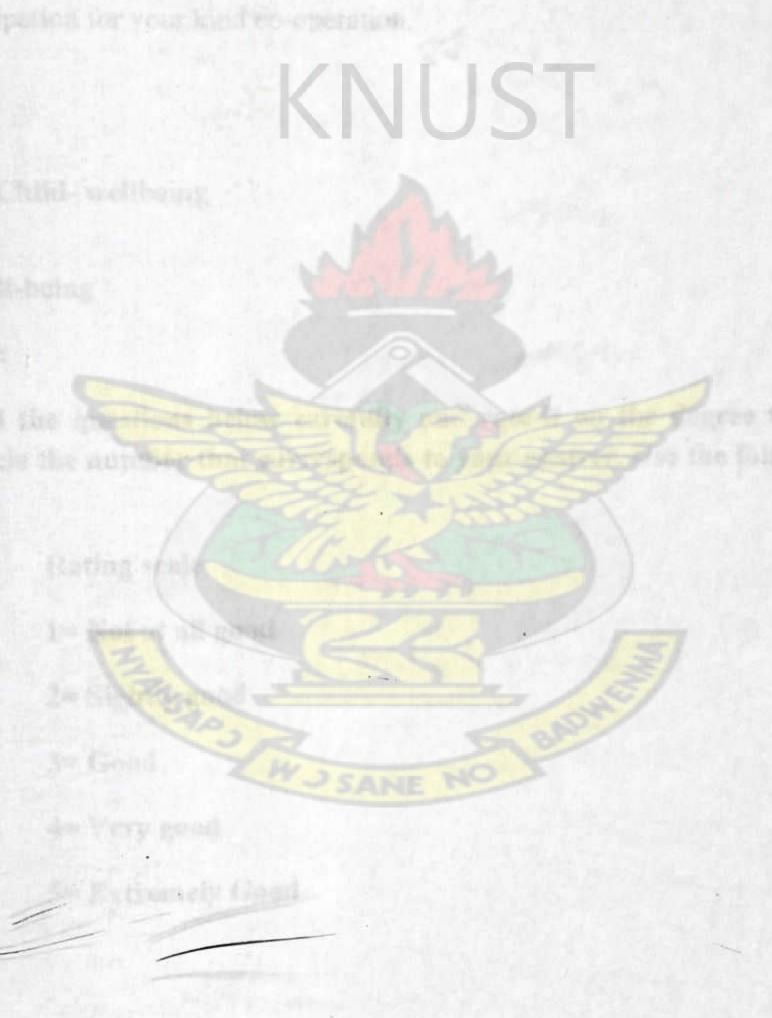
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Appendix B

Study Questionnaire

This questionnaire is part of introductory exercises to learning about research project at KNUST. It is meant solely for academic purpose. Any response you give will be treated confidentially. Please do not write your name, telephone number or any personal reference as your response would be anonymous. You are kindly requested to answer all questions as frankly as you can. Please note that there is no right or wrong answer. Thank you in anticipation for your kind co-operation.

and an early seed where your KANUS or would you?

Section A: Child- wellbeing

I-Social well-being

Instruction:

Please read the questions below carefully and rate it on the degree to which you agree. Circle the number that corresponds to your answer. Use the following rating scale:

Rating scale

1= Not at all good

2= Sightly good

3= Good

4= Very good

5= Extremely Good

^{1.} How do you feel when your parents/guardian provides social support to you? 1

2. If parents /guardian disagree with you on an issue how do you feel? 5 4 3 2 1 3. How do you feel when the people in your family understand you? 3 4 5 4. How do feel when you play with your family? 1 2 3 4 5 5. If you attend parties with friends how do you feel? 1 2 3 4 5 6. How do you feel when your parent/guardian is hostile toward you? 5 4 3 2 1 7. How do you feel when siblings irritate you? 3 2 1

II- Physical well-being

Instruction:

Please read the questions below carefully and indicate how frequent you have experience any of the following in the past 3 months. Circle the number that corresponds to your answer. Use the following rating scale:

Rating scale

1= Most often

2= Very often

3= Often

4= Not very often

5= Never

8. How often did you have headache?

1 2 3 4 5

9. How often did you complain of sleeplessness	1	2	3	4	5	
10. How often did you complain of pain?	1	2	3	4	5	
11. How often did you complain of tiredness/fatigue	1	2	3	4	5	
12. How often did your parent/guardian monitor you?	5	4	3	2	1	
13. How often do you take medication?	1	2	3	4	5	
14. Does your parent/guardian beat you with stick?	1	2	3	4	5	

III- Emotional well-being

Instruction:

Please read the questions below carefully and rate it on the degree to which you agree. Circle the number that corresponds to your answer. Use the following scale.

Rating scale

1= Most often

2= Very often

3= Often

4= Not very often

5= Never

15. Do you worry about your daily chores at home?	1	2	3	4	5	
16. Are you sad when your parents/guardian is not at home?	1	2	3	4	5	
17. How often do you become anxious?	1	2	3	4	5	
18. Are you happy when you are not at home for a longer time?	1	2	3	4	5	

19. How often do you feel lonely?	1	2	3	4	5	
20. Do you feel abandoned by friends?	1	2	3	4	5	
21. Do you always seek attention from others?	-	2	3	4	5	

IV-Academic attainment

Instruction:

Please read the questions below carefully and rate it on the degree to which you agree. Circle the number that corresponds to your answer. Use the following scale.

Rating scale 1= Never 2= Not very often 3= Often 4= Very often 5= Most often

22. How often do you go to the library?	1	2	3	4	5	
23. I use the internet as a study aid?	1	2	3	4	5	
24. I read other books or novel apart from class notes?	1	2	3	4	5	
25. I enjoy group discussions?	1	2	3	4	5	
26. Do you watch the television?	5	4	3	2	1	
27. I read novels at my free time?	1	2	3	4	5	
28. I rehearse my notes	1	2	3	4	5	

1-Religion

Please read the questions below carefully and rate it on the degree to which you agree. Circle the number that corresponds to your answer. Use the following scale.

Rating Scale

1= Not at all

2= slightly true of me

3= True of me

4= Very true of me

5= Extremely true of me

29. My religious practices make me obey elders	1	2	3	4	5
30. I pray once every day	1	2	3	4	5
31. I consult my spiritual leader anytime I have personal problem	1	2	3	4	5
32. I regularly contribute to my religious wellbeing	1	2	3	4	5
33. I celebrate religious festivities regularly	1	2	3	4	4
34. I forgive friends who offends me	1	2	3	4	4
35. My moral principles direct the way I conduct myself	1	2	3	4	5

II-Parenting Quality

Please read the questions below carefully and rate it on the degree to which you agree. Circle around the number that corresponds to your answer. Use the following scale.

Rating Scale

1= Not at all true of me

2= Hardly ever true

3= Sometimes true

4= True most of the time

5= Always true of me

36. My parent/guardian is not at home most of the time I go to school	5	4	3	2	1
37. My parent/guardian is at home most of the time I go to bed	1	2	.3	4	5
38. I feel close to your parent/guardian	1	2	3	4	5
39. I share my problems openly with my parent/guardian	1	2	3	4	5
40. I am satisfied with the way my parent/guardian and me communic	cate	.1	2	3	4
5					
41. My parent/guardian educate me on sex	2 :	3 4	4 5		
42. My parent/guardian monitors my work at home and school	1 2	. 3	4	5	

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Section B: Demographic characteristics

Instruction

Please answer the following questions by indicating your answer in the small box
43. Age:
a. 12-14 b. 14-16 c. 16-18
44. Gender:
a. Male b. Female b. Female
45. Religion:
a. Muslim b. Christian c. Traditional d. others
Please, specify
46. Ethnicity: a. Aka b. G c. Frafi
d. Ewe e. Nzema f. Dagomda
g. Other please specify
47. Please indicate your form: a. One b. Two c. Three d. Four
48. Programme of study: a. General Arts b. Business c. Science
d . Home Economics e. Visual Art
49. How many are you in your family?

a. 2 b. 3 c. 4
d. 5 e.6 f. 6+
50. Are you the only child? a. Yes b. No b.
51. How many siblings do you have?
a. 1 b 2 c. 3
d.4 e. 5 f. 6+
52. What position do you occupy in terms of birth order?
a. 1 st b. 2 nd c. 3 rd
d. 4 th e. 5th f. others please specify
53. Whom are you currently living with?
a. mother only b. father only c. both parents
e. uncle e. aunt f. grandmother g. grandfather
h. both grandparents i. Foster parents j. stepparent
i. others please specify

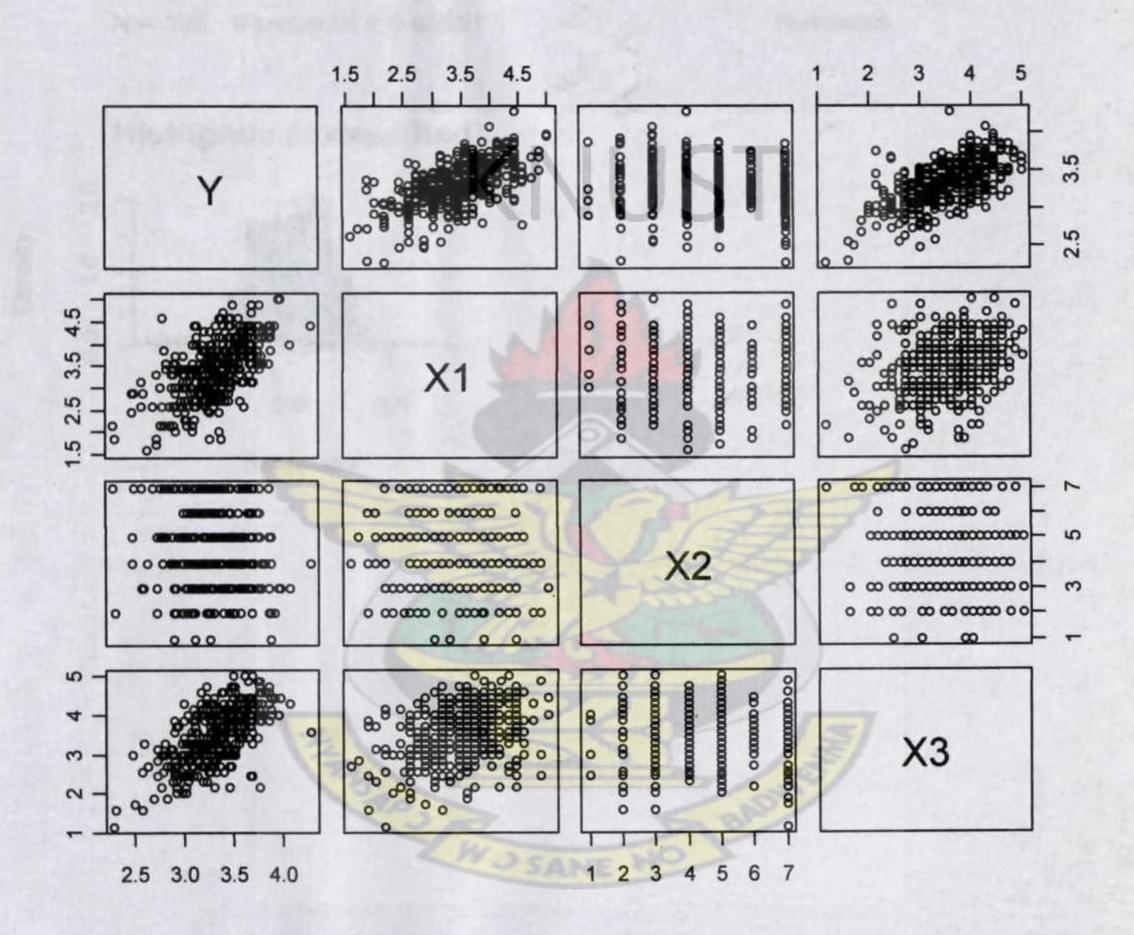
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THANK YOU VERY MUCH FOR PARTICIPATION

Appendix C

Figure: 2.5

Scatter plots of dependent variable against independent variables predicting a linear relationship between the variables.

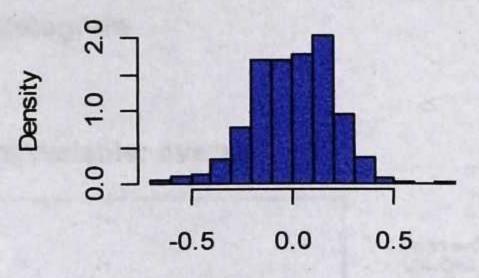


density.default(x = resid(bed))

Oeusity 5.0 0.0 0.5

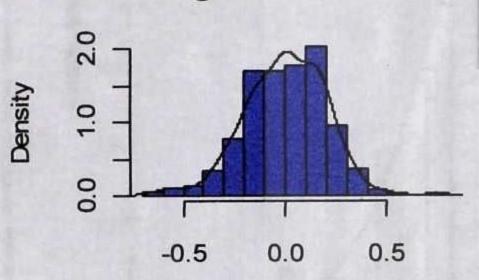
N = 395 Bandwidth = 0.05381

Histogram of resid(bed)



Residuals

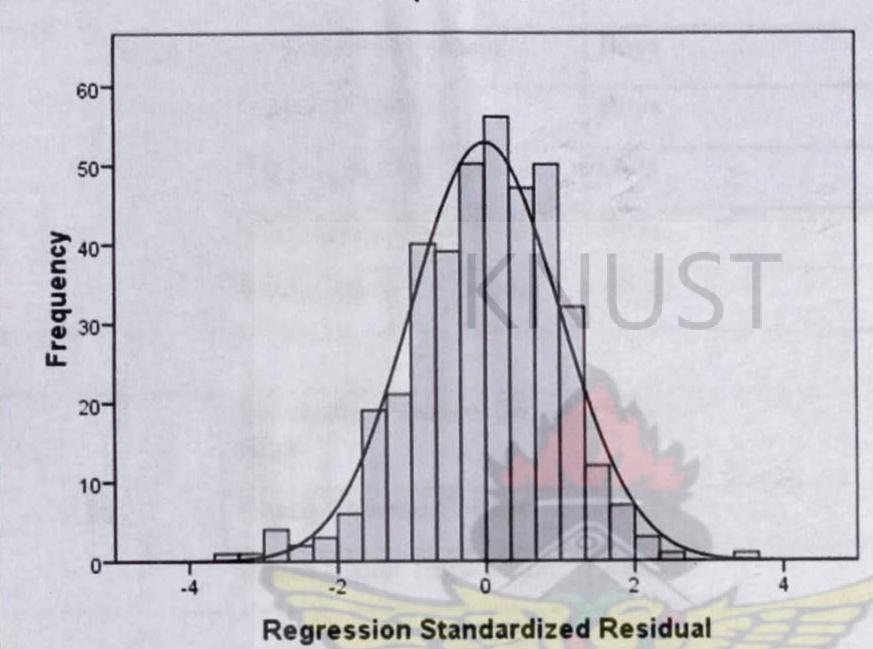
Histogram of resid(bed)



Residuals

Histogram

Dependent Variable: overall



Mean =-6.71E-15 Std. Dev. =0.996 N =395

Table 3.5

Category of schools in the Cape Coast District from which first sampling was made.

Category of Schools	Names of Schools	Gender of Schools	Status
	St. Augustine College	Boys	Boarding
	Adisadel College	Boys	Boarding
A	Holy Child High School	Girls	Boarding
	Mfantsipim Senior High	Boys	Boarding
	Wesley Girls Senior High	Girls	Boarding
			D 01 1
	University Practice Senior High	Mixed	Day/Hostel
В	Ghana National College	Mixed	Boarding
	Oguaa Senior High/Tech	Mixed	Day
	MESEU	BI FIF	
	Academy of Christ the King	Mixed	Day
C	Effutu Senior High/Tech	Mixed	Day/Hostel
D	Pitmas High School	Mixed	Day/hostel
	Sammy Otoo High School	Mixed	Day/Boarding
E	Cape Coast Technical Inst.	Mixed	Day
	Commercial Institute of Secretariats	Mixed	Day